## Case 17-24756-GLT Doc 17 Filed 12/21/17 Entered 12/21/17 21:05:14 Desc Main Document Page 1 of 68

Fill in this in	formation to ide	ntify your case:		
Debtor 1	Jeremy Fisher			
Service and the service and th	First Name	Middle Name	Last Name	
Debtor 2				
(Spouse, if filing)	First Name	Middle Name	Last Name	
United States I	Bankruptcy Court for	the: Western District of F	Pennsylvania	
Case number	17-24756-GL	.T		
	(If known)			

☐ Check if this is an amended filing

12/15

### Official Form 106Sum

### Summary of Your Assets and Liabilities and Certain Statistical Information

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Fill out all of your schedules first; then complete the information on this form. If you are filing amended schedules after you file your original forms, you must fill out a new *Summary* and check the box at the top of this page.

	Your assets Value of what you own
Schedule A/B: Property (Official Form 106A/B)	\$ 0.00
1a. Copy line 55, Total real estate, from Schedule A/B	
1b. Copy line 62, Total personal property, from Schedule A/B	\$8,810.00
1c. Copy line 63, Total of all property on Schedule A/B	\$\$
art 2: Summarize Your Liabilities	
	Your liabilities Amount you owe
Schedule D: Creditors Who Have Claims Secured by Property (Official Form 106D)  2a. Copy the total you listed in Column A, Amount of claim, at the bottom of the last page of Part 1 of Schedule	e D
Schedule E/F: Creditors Who Have Unsecured Claims (Official Form 106E/F)  3a. Copy the total claims from Part 1 (priority unsecured claims) from line 6e of Schedule E/F	\$\$
3b. Copy the total claims from Part 2 (nonpriority unsecured claims) from line 6j of Schedule E/F	+ \$ 211,055.41
Your total	liabilities \$211,055.41
art 3: Summarize Your Income and Expenses	
Schedule I: Your Income (Official Form 106I) Copy your combined monthly income from line 12 of Schedule I	\$3,500.00
Schedule J: Your Expenses (Official Form 106J)	

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Debtor 1	Jeremy Fisher	ase number (if known) 17-24756-GLT
	First Name Middle Name Last Name	
Port 4	Annual Three Counting for Administration and Counting I Pro-	9
Part 4	Answer These Questions for Administrative and Statistical Records	
6. Are	you filing for bankruptcy under Chapters 7, 11, or 13?	
	No. You have nothing to report on this part of the form. Check this box and submit this f	form to the court with your other schedules.
Ø.	/es	•
***************************************		
7. Wha	t kind of debt do you have?	
	our debts are primarily consumer debts. Consumer debts are those "incurred by ar	individual primarily for a personal,
1	amily, or household purpose." 11 U.S.C. § 101(8). Fill out lines 8-9g for statistical purpo	
<b>2</b>	<b>Your debts are not primarily consumer debts</b> . You have nothing to report on this par his form to the court with your other schedules.	t of the form. Check this box and submit
	ins form to the court with your other schedules.	
8. From	n the Statement of Your Current Monthly Income: Copy your total current monthly in 1 122A-1 Line 11; OR, Form 122B Line 11; OR, Form 122C-1 Line 14.	come from Official
201000000000000000000000000000000000000		
9. Copy	the following special categories of claims from Part 4, line 6 of Schedule E/F:	
		Total claim
-	Post 4 on Delay I.d. 5/5 amounts following	
Fre	om Part 4 on Schedule E/F, copy the following:	
00.1	Demostic support obligations (Conv. line So.)	\$
94.1	Domestic support obligations (Copy line 6a.)	Ψ
9b. 7	axes and certain other debts you owe the government. (Copy line 6b.)	\$
	у том	
9c. (	Claims for death or personal injury while you were intoxicated. (Copy line 6c.)	\$
9d. S	Student loans. (Copy line 6f.)	\$
00.0	Obligations arising out of a congression agreement or diverse that you did not report as	7
	Obligations arising out of a separation agreement or divorce that you did not report as priority claims. (Copy line 6g.)	\$
9f. [	Debts to pension or profit-sharing plans, and other similar debts. (Copy line 6h.)	т \$
9g. 7	<b>Fotal.</b> Add lines 9a through 9f.	\$
1		vi and the second secon

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Debtor 1	Jeremy		Fisher	
	First Name	Middle Name	Last Name	
Debtor 2				
(Spouse, if filing)	First Name	Middle Name	Last Name	
United States I	Bankruptcy Court for the:	Western District of F	Pennsylvania	

Official Form 106A/B

### Schedule A/B: Property

12/15

☐ Check if this is an amended filing

In each category, separately list and describe items. List an asset only once. If an asset fits in more than one category, list the asset in the category where you think it fits best. Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

o you owi	n or have any legal or equitable interes	st in any residence, building, land, or similar prop	erty?		
No. Go	to Part 2.				
	here is the property?				
1.1.	et address, if available, or other description	What is the property? Check all that apply.  ☐ Single-family home ☐ Duplex or multi-unit building	Do not deduct secured classified amount of any secure Creditors Who Have Claim	d claims on Schedule D	
Street	a address, if available, or other description	<ul><li>Condominium or cooperative</li><li>Manufactured or mobile home</li></ul>	Current value of the entire property?	Current value of the portion you own?	
_		Land	\$	\$	
City	City State ZIP Code	☐ Investment property ☐ Timeshare ☐ Other	Describe the nature of interest (such as fee the entireties, or a life	simple, tenancy by	
		Who has an interest in the property? Check one.			
		Debtor 1 only	-		
Count	ity	Debtor 2 only	☐ Check if this is co	mmunity property	
		Debtor 1 and Debtor 2 only	Check if this is community property (see instructions)		
you own c	or have more than one, list here:	Other information you wish to add about this it property identification number:			
you own c	or have more than one, list here:	Other information you wish to add about this it property identification number:  What is the property? Check all that apply.	Do not deduct secured cla		
	or have more than one, list here:	Other information you wish to add about this it property identification number:  What is the property? Check all that apply.  Single-family home	Do not deduct secured clause amount of any secure	d claims on Schedule D	
12	or have more than one, list here:	Other information you wish to add about this it property identification number:  What is the property? Check all that apply.  Single-family home  Duplex or multi-unit building	Do not deduct secured cla	d claims on Schedule D ms Secured by Property	
12		Other information you wish to add about this it property identification number:  What is the property? Check all that apply.  Single-family home Duplex or multi-unit building Condominium or cooperative	Do not deduct secured clithe amount of any secure Creditors Who Have Clair  Current value of the	d claims on Schedule D ms Secured by Property. Current value of the	
12		Other information you wish to add about this it property identification number:  What is the property? Check all that apply.  Single-family home  Duplex or multi-unit building  Condominium or cooperative  Manufactured or mobile home	Do not deduct secured clithe amount of any secure Creditors Who Have Clain	d claims on Schedule D ms Secured by Property	
12		Other information you wish to add about this it property identification number:  What is the property? Check all that apply.  Single-family home  Duplex or multi-unit building  Condominium or cooperative  Manufactured or mobile home  Land	Do not deduct secured clithe amount of any secure Creditors Who Have Clair  Current value of the	d claims on Schedule D ms Secured by Property Current value of the	
12		Other information you wish to add about this it property identification number:  What is the property? Check all that apply.  Single-family home  Duplex or multi-unit building  Condominium or cooperative  Manufactured or mobile home	Do not deduct secured clithe amount of any secure Creditors Who Have Clair  Current value of the	d claims on Schedule D ms Secured by Property  Current value of the portion you own?  \$	
1.2. Street	et address, if available, or other description	Other information you wish to add about this it property identification number:  What is the property? Check all that apply.  Single-family home  Duplex or multi-unit building  Condominium or cooperative  Manufactured or mobile home  Land  Investment property  Timeshare	Do not deduct secured classes the amount of any secure Creditors Who Have Claim  Current value of the entire property?  \$	d claims on Schedule D ms Secured by Property  Current value of the portion you own?  \$ of your ownership simple, tenancy by	
1.2. Street	et address, if available, or other description	Other information you wish to add about this it property identification number:	Do not deduct secured classes the amount of any secure Creditors Who Have Claim  Current value of the entire property?  \$	d claims on Schedule D ms Secured by Property  Current value of the portion you own?  \$ of your ownership simple, tenancy by	
1.2. Street	et address, if available, or other description  State ZIP Code	Other information you wish to add about this it property identification number:	Do not deduct secured classes the amount of any secure Creditors Who Have Claim  Current value of the entire property?  \$	d claims on Schedule D ms Secured by Property  Current value of the portion you own?  \$	
1.2. Street	et address, if available, or other description  State ZIP Code	Other information you wish to add about this it property identification number:  What is the property? Check all that apply.  Single-family home  Duplex or multi-unit building  Condominium or cooperative  Manufactured or mobile home  Land Investment property  Timeshare  Other  Who has an interest in the property? Check one.  Debtor 1 only	Do not deduct secured classes the amount of any secure Creditors Who Have Claim  Current value of the entire property?  \$	d claims on Schedule D ms Secured by Property  Current value of the portion you own?  \$	

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ebtor 1	Jeremy		Fisher Case number	(II KNOWN)			
	First Name Middle	e Name Last Na	ne .				
1.3.			What is the property? Check all that apply.  Single-family home	the am	deduct secured cla ount of any secure ors Who Have Clain	ed claims	on Schedule D
	Street address, if available	e, or other description	Duplex or multi-unit building Condominium or cooperative	Curre	nt value of the property?	Curre	
			☐ Manufactured or mobile home☐ Land	\$		\$	
	City	State ZIP Cod	☐ Investment property ☐ Timeshare	Descr	ibe the nature of	of your	ownership
		oldio Eli ood	Other		st (such as fee tireties, or a life		
			Who has an interest in the property? Check one	. —			
	County		□ Debtor 1 only □ Debtor 2 only				
			Debtor 1 and Debtor 2 only		eck if this is co	mmuni	ty property
			At least one of the debtors and another				
			Other information you wish to add about this property identification number:				
			all of your entries from Part 1, including any entr			\$	0.0
you h	ave attached for Part	1. Write that numbe	r here.				
you c		al or equitable inte	est in any vehicles, whether they are registered o			s	
you o	own, lease, or have leg that someone else drive vans, trucks, tractors,	al or equitable inters. If you lease a vehi	cle, also report it on Schedule G: Executory Contract			S	,7
you ou own	own, lease, or have leg that someone else drive vans, trucks, tractors,	al or equitable inters. If you lease a vehi	cle, also report it on Schedule G: Executory Contract			s	
you ou own Cars,	own, lease, or have leg that someone else drive vans, trucks, tractors,	al or equitable inters. If you lease a vehi	cle, also report it on Schedule G: Executory Contract es, motorcycles  Who has an interest in the property? Check one	s and Unex	cpired Leases.	aims or e	
you our own Cars, No.	own, lease, or have leg that someone else drive vans, trucks, tractors, o	al or equitable inters. If you lease a vehicle sport utility vehicle Ford	cle, also report it on Schedule G: Executory Contract es, motorcycles  Who has an interest in the property? Check one Debtor 1 only	Do not the amo	xpired Leases.	aims or e d claims	on Schedule D
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Cars, No. Ye  3.1.	wwn, lease, or have leg that someone else drive wans, trucks, tractors, or es.  Make: Model: Year: Approximate mileage: Other information:  own or have more than Make: Model: Year: Approximate mileage:	al or equitable inters. If you lease a vehicle so if you lease a vehic	who has an interest in the property? Check one Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another  Check if this is community property (see instructions)  Who has an interest in the property? Check one Debtor 1 only Debtor 2 only At least one of the debtors and another	Do not the amo Creditor  Do not the amo Creditor  Do not the amo Creditor  Currer	deduct secured class who Have Claim  1,500.00  deduct secured class who Have Claim  1,500.00  deduct secured class who Have Claim  the property?	aims or e d claims  Secur  Curre portio  \$	on Schedule ed by Proper nt value of n you owr  1,500  exemptions. Proper on Schedule ed by Proper nt value of nn you owr

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ve more than one, lis	here:			
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rmation:	350	en:	Note that the second of the se	portion you own?
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Debtor 1

Jeremy First Name

remy

Fisher

Case number (if known) 17-24756-GLT

Do you own	or have any legal or equitable interest in any of the following items?	Current value of the portion you own?  Do not deduct secured claims or exemptions.
6. Househo	ld goods and furnishings	
Examples	: Major appliances, furniture, linens, china, kitchenware	
<b>☑</b> No	processing and the state of the	
Yes. [	Describe	\$
7. Electroni	CS	
	Televisions and radios; audio, video, stereo, and digital equipment; computers, printers, scanners; music collections; electronic devices including cell phones, cameras, media players, games	
☐ No		***************************************
Yes. D	Describe computer and cell phone	\$500.00
8. Collectibl	es of value	
Examples  No	Antiques and figurines; paintings, prints, or other artwork; books, pictures, or other art objects; stamp, coin, or baseball card collections; other collections, memorabilia, collectibles	
	Describe	\$
9. Equipmer	nt for sports and hobbies	
Examples	Sports, photographic, exercise, and other hobby equipment; bicycles, pool tables, golf clubs, skis; canoes and kayaks; carpentry tools; musical instruments	
✓ No		
Yes. D	Describe	\$
10. Firearms		
Examples  No	: Pistols, rifles, shotguns, ammunition, and related equipment	
Yes. D	Describe	\$
11. Clothes		
	Everyday clothes, furs, leather coats, designer wear, shoes, accessories	
☐ No ☑ Yes. □	Describe personal clothing	\$350.00
12. <b>Jewelry</b> Examples	Everyday jewelry, costume jewelry, engagement rings, wedding rings, heirloom jewelry, watches, gems, gold, silver	
☑ No ☐ Yes. □	Describe	\$
13. Non-farm	animals	
	: Dogs, cats, birds, horses	
☐ No	The state of the s	
ATT. 12 (1000 TO 1000	Describedog	\$0.00
14. Any other	r personal and household items you did not already list, including any health aids you did not list	
☑ No		
	Give specific	\$
Yes. C	ation 1	1
inform	dollar value of all of your entries from Part 3, including any entries for pages you have attached	

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Debtor 1

Part 4:

Jeremy First Name

Middle Name

**Describe Your Financial Assets** 

Fisher

Case number (if known) 17-24756-GLT

Do you own or have any	legal or equitable interest in	any of the following?		Current value of the portion you own?  Do not deduct secured claims or exemptions.
16. <b>Cash</b> <i>Examples:</i> Money you h	nave in your wallet, in your hom	ne, in a safe deposit box, and on hand when you fi	le your petition	
□ No				
Yes			Cash:	\$60.00
17. <b>Deposits of money</b> Examples: Checking, so and other sin	avings, or other financial accou milar institutions. If you have m	nts; certificates of deposit; shares in credit unions ultiple accounts with the same institution, list each	, brokerage houses,	
□ No	andat sthere — ID Come and the American State State State Come (American State State Come (American State S	2		
☑ Yes		Institution name:		
	17.1. Checking account:	Wesbanco	2	\$900.00
	17.2. Checking account:			\$
	17.3. Savings account:			\$
	17.4. Savings account:			\$
	17.5. Certificates of deposit:			\$
	17.6. Other financial account:	-		\$
	17.7. Other financial account:			\$
	17.8. Other financial account:			\$
	17.9. Other financial account:			\$
☑ No	investment accounts with broke	rage firms, money market accounts		
☐ Yes	Institution or issuer name:			
				\$ \$
				\$ \$
				*
19. Non-publicly traded sto		ated and unincorporated businesses, includin	g an interest in	
☐ No	Name of entity:		% of ownership:	
Yes. Give specific information about	JBT Contracting LLC		100%%	\$0.00
them			0% %	\$
			0%%	\$

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Fisher

	Clark M.		10 MARCHOLDATOR	Case number (if known) 17-247	JO OLI
	First Name	Middle Name Last	Name	1900 and the Strucked Strucked Struck Strucked Annual Annu	8:
Governm	nent and corn	orate honds and other	negotiable and non-negotiab	In itemateur	
Non-neg	otiable instrum	ents are those you cannot	s, cashiers' checks, promissory of transfer to someone by signir	notes, and money orders. ng or delivering them.	
☑ No					
	Give specific	Issuer name:			
inform	nation about	issuer names			
them.					_ \$
					- \$
					- \$
	ent or pension		(850 + le 1000) (10 + le 1000) (10 + le 1000)		
	s: Interests in II	RA, ERISA, Keogh, 401(	(k), 403(b), thrift savings accour	nts, or other pension or profit-sharing pla	ns
☑ No					
Yes. I		Time of assertation to	_ K	9	
accoc	in separately.	Type of account: Ir	nstitution name:		
		401(k) or similar plan: _			\$
		Pension plan:			\$
		IRA:			\$
		Retirement account:			\$
		Keogh:			\$
		Additional account:			\$
		-			
Security	denosite and I	Additional account:		×	
Your share Examples	deposits and presents of all unused so Agreements of a continuous so or others	Additional account:  prepayments deposits you have made		vice or use from a company	
Your shar Examples companie	e of all unused : Agreements v	Additional account:  prepayments I deposits you have madwith landlords, prepaid re	e so that you may continue sen	vice or use from a company	
Your shar Examples companie	re of all unused s: Agreements v ss, or others	Additional account:  prepayments I deposits you have madwith landlords, prepaid re	e so that you may continue sen ent, public utilities (electric, gas,	vice or use from a company	
Your shar Examples companie	re of all unused s: Agreements v ss, or others	Additional account:  prepayments I deposits you have made with landlords, prepaid re	e so that you may continue sen ent, public utilities (electric, gas,	vice or use from a company	\$\$ \$\$
Your shar Examples companie	re of all unused s: Agreements v ss, or others	Additional account:  prepayments I deposits you have made with landlords, prepaid referred in the landlords.  Institute Electric:  Gas:	e so that you may continue sen ent, public utilities (electric, gas,	vice or use from a company	\$\$ \$\$ \$\$
Your shar Examples companie	re of all unused s: Agreements v ss, or others	Additional account:  prepayments I deposits you have madwith landlords, prepaid reference Institute Electric: Gas: Heating oil:	e so that you may continue sent, public utilities (electric, gas, attion name or individual:	vice or use from a company water), telecommunications	\$\$ \$\$ \$\$
Your shar Examples companie	re of all unused s: Agreements v ss, or others	Additional account:  prepayments I deposits you have made with landlords, prepaid referred in the landlords.  Institute Electric:  Gas:  Heating oil:  Security deposit on rental	e so that you may continue sen ent, public utilities (electric, gas,	vice or use from a company water), telecommunications	\$\$ \$\$ \$\$
Your shar Examples companie	re of all unused s: Agreements v ss, or others	Additional account:  prepayments I deposits you have madwith landlords, prepaid reference Institute Electric: Gas: Heating oil:	e so that you may continue sent, public utilities (electric, gas, attion name or individual:	vice or use from a company water), telecommunications	\$\$ \$\$ \$\$ \$\$
Your shar Examples companie	re of all unused s: Agreements v ss, or others	Additional account:  prepayments I deposits you have made with landlords, prepaid referred in the landlords.  Institute Electric:  Gas:  Heating oil:  Security deposit on rental	e so that you may continue sent, public utilities (electric, gas, tition name or individual:	vice or use from a company water), telecommunications	\$\$ \$\$ \$\$ \$\$
Your shar Examples companie	re of all unused s: Agreements v ss, or others	Additional account:  prepayments I deposits you have madwith landlords, prepaid refund in the landlords.  Institute Electric:  Gas:  Heating oil:  Security deposit on rental Prepaid rent:	e so that you may continue sent, public utilities (electric, gas, tition name or individual:	vice or use from a company water), telecommunications	\$\$ \$\$ \$\$ \$\$ \$\$
Your shar Examples companie	re of all unused s: Agreements v ss, or others	Additional account:  prepayments I deposits you have madwith landlords, prepaid reference  Institute Electric:  Gas: Heating oil: Security deposit on rental Prepaid rent: Telephone:	e so that you may continue sent, public utilities (electric, gas, attion name or individual:	vice or use from a company water), telecommunications	\$\$ \$\$ \$\$ \$\$ \$\$
Your shar Examples companie	re of all unused s: Agreements v ss, or others	Additional account:  prepayments I deposits you have madwith landlords, prepaid reference  Electric:  Gas: Heating oil: Security deposit on rental Prepaid rent: Telephone: Water: Rented furniture:	e so that you may continue sent, public utilities (electric, gas, attion name or individual:	vice or use from a company water), telecommunications	\$\$ \$\$ \$\$ \$\$ \$\$
Your shar Examples companie	re of all unused s: Agreements v ss, or others	Additional account:  prepayments I deposits you have madwith landlords, prepaid reference last the last transfer l	e so that you may continue sent, public utilities (electric, gas, attion name or individual:	vice or use from a company water), telecommunications	\$\$ \$\$ \$\$ \$\$ \$\$
Your shar Examples companie  ✓ No  ☐ Yes	e of all unused	Additional account:  prepayments I deposits you have madwith landlords, prepaid reference  Gas: Heating oil: Security deposit on rental Prepaid rent: Telephone: Water: Rented furniture: Other:	e so that you may continue sentent, public utilities (electric, gas, ution name or individual:	vice or use from a company water), telecommunications	\$\$ \$\$ \$\$ \$\$ \$\$
Your shar Examples companie  No Yes	e of all unused	Additional account:  prepayments I deposits you have madwith landlords, prepaid reference  Gas: Heating oil: Security deposit on rental Prepaid rent: Telephone: Water: Rented furniture: Other:	e so that you may continue sent, public utilities (electric, gas, attion name or individual:	vice or use from a company water), telecommunications	80.5
Your shar Examples companie  No Yes  Annuities	e of all unused at Agreements was, or others	Additional account:  prepayments I deposits you have madwith landlords, prepaid reference  Electric:  Gas: Heating oil: Security deposit on rental Prepaid rent: Telephone: Water: Rented furniture: Other:	e so that you may continue sentent, public utilities (electric, gas, attion name or individual:  unit:	vice or use from a company water), telecommunications	\$\$ \$\$ \$\$ \$\$ \$\$
Your shar Examples companie  No Yes  Annuities	e of all unused	Additional account:  prepayments I deposits you have madwith landlords, prepaid reference  Gas: Heating oil: Security deposit on rental Prepaid rent: Telephone: Water: Rented furniture: Other:	e so that you may continue sentent, public utilities (electric, gas, attion name or individual:  unit:	vice or use from a company water), telecommunications	\$\$ \$\$ \$\$ \$\$ \$\$ \$\$
Your shar Examples companie  No Yes  Annuities	e of all unused at Agreements was, or others	Additional account:  prepayments I deposits you have madwith landlords, prepaid reference  Electric:  Gas: Heating oil: Security deposit on rental Prepaid rent: Telephone: Water: Rented furniture: Other:	e so that you may continue sentent, public utilities (electric, gas, attion name or individual:  unit:	vice or use from a company water), telecommunications	\$\$ \$\$ \$\$ \$\$ \$\$

Jeremy

Debtor 1

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Debtor 1			Fisher	Case number (if known) 17-24756-GL	Τ
	First Name Middle	Name Last Name			
26 U	.S.C. §§ 530(b)(1), 529A(	(b), and 529(b)(1).		r under a qualified state tuition program.	
		Institution name and de	scription. Separately file t	he records of any interests.11 U.S.C. § 521(c)	):
					\$
					\$
					\$
	ts, equitable or future in cisable for your benefit		er than anything listed i	n line 1), and rights or powers	
Z N	No				
☐ Y ir	es. Give specific		AND STOCKED TO STOCKED		\$
Exan ☑ N ☐ Y	nples: Internet domain na	arks, trade secrets, and imes, websites, proceeds			\$
					ď
Exan	nples: Building permits, ex	ther general intangibles xclusive licenses, coopera		, liquor licenses, professional licenses	
Z N	To the second se				
	es. Give specific nformation about them				\$
Money o	or property owed to you	1?			Current value of the portion you own? Do not deduct secured claims or exemptions.
28. <b>Tax r</b>	refunds owed to you				
ZÍ N	(F)				
☐ Y	es. Give specific informa	- 15 Table 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1		Federal:	B
	about them, including you already filed the			State:	<b>5</b>
	and the tax years			Local:	5
		<u> </u>			
		sum alimony, spousal sup	port, child support, mainte	nance, divorce settlement, property settlemen	nt
25.55	es. Give specific informa	ition			
				Alimony:	\$
				Maintenance:	\$
		No.		Support:	\$ \$
				Divorce settlement:	s
				Property settlement:	<u> </u>
Exan	Social Security ber	ves you ability insurance payment nefits; unpaid loans you n	ts, disability benefits, sick nade to someone else	pay, vacation pay, workers' compensation,	
□ N	√o os. Give specific informa	ation [			
W Y	es. Give specific informa	equipmer equipmer	nt rental		\$1,500.00

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De	btor 1	Jeremy		Fisher	Case number (if known) 17-24756-0	SLT
		First Name	Middle Name	Last Name	Case Hamber (II NIOWII)	V
			ce policies sability, or life insuran	: ce; health savings account (HSA)	; credit, homeowner's, or renter's insurance	
	☑ No					
	✓ Yes. N o	lame the in: of each polic	surance company by and list its value	Company name:	Beneficiary:	Surrender or refund value:
		31		<u> </u>		\$
						\$
						\$
9	If you are	the benefici		from someone who has died xpect proceeds from a life insurar	nce policy, or are currently entitled to receive	
	🔲 Yes. G	Sive specific	information		(8)	
			www.			\$
1	Examples: No	Accidents,	employment disputes	not you have filed a lawsuit or s, insurance claims, or rights to si		
	Yes. D	escribe ead	ch claim	construction work that was	s unpaid	\$ 2,000.00
	to set off	claims	d unliquidated claim	s of every nature, including co	unterclaims of the debtor and rights	
	00.2	obolibo cut	ST Glaim.			\$
-	Z Ņo		you did not already	list		\$
36. <i>i</i>	Add the defor Part 4.	ollar value Write that	of all of your entries	s from Part 4, including any ent	ries for pages you have attached	\$4,960.00
Par	t 5: D	escribe	Any Business-R	Related Property You Ow	n or Have an Interest In. List any r	eal estate in Part 1.
_			any legal or equitab	le interest in any business-rela	ted property?	
		to Part 6. o to line 38				
	■ 163. G	o to line 36	5			Current value of the
		*				portion you own?  Do not deduct secured claims or exemptions.
38. 🖊	ccounts	receivable	or commissions you	u already earned		
	No T				0	
ļ	■ Yes. D	escribe		36		\$
			rnishings, and supp		*	al .
Ε					nes, rugs, telephones, desks, chairs, electronic devices	
Ţ	Yes. De	escribe				\$
100			·			

Jeremy

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Debtor 1 Jeleni First Name		<sub>known)</sub> 17-24/56-0	ند
	mode realite Last Ivalile		
40. Machinery, fixture	es, equipment, supplies you use in business, and tools of your trade		
☑ No			
☐ Yes. Describe		WIRE CO. VICTOR CO. VI	******
ee. Decembe	The second secon		\$
	5		
41. Inventory			
■ No			risency
Yes. Describe.			•
		***************************************	
MANA BANKANANANANANANANANANANANANANANANANANAN	end 2 100 9 H		*
	erships or joint ventures		
☑ No			
Yes. Describe.	Name of entity:	% of ownership:	
		%	\$
		%	
		No.	\$
		%	\$
43 Customer liete m	ailing lists, or other compilations		
No No	aning lists, or other compliations		
Section appropria	ists include personally identifiable information (as defined in 11 U.S.C. § 101(41A)	1/3	
□ No	ists include personally identifiable information (as defined in 11 0.5.0. § 101(41A)	1) £	
			oneses
☐ Yes. L	Describe		\$
			*
44 Any husiness-role	ted property you did not already list		
No No	tica property you did not already list		
Yes. Give spec	ific.		
information			\$
			\$
			\$
22		8	-
			\$
	6.		\$
			\$
	ue of all of your entries from Part 5, including any entries for pages you have att		\$ 0.00
for Part 5. Write th	at number here	→	Name and the second of the sec
Part 6: Describe	e Any Farm- and Commercial Fishing-Related Property You Own or Ha	ve an Interest I	n.
If you ow	n or have an interest in farmland, list it in Part 1.	5	
46. Do you own or ha	ve any legal or equitable interest in any farm- or commercial fishing-related prop	erty?	
No. Go to Part			
Yes. Go to line	47.		
			Current value of the
			portion you own?
			Do not deduct secured claims
47. Farm animals			or exemptions.
	k, poultry, farm-raised fish		
✓ No	Para 11 miles 1011		
Yes			innig
<b>□</b> 1es			
			\$
	ELECTION OF THE PROPERTY OF TH		704

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Debtor 1	Jeremy First Name		Fisher	C	case number (if known) 17-24756-0	SLT	
	First Name	Middle Name Last Name					
48. Crops—	either growin	g or harvested					
☑ No				*		and the same of th	
	Give specific mation					\$	
49. Farm an	d fishing equi	pment, implements, machinery, fi	xtures, and too	ls of trade			
					, , , , , , , , , , , , , , , , , , ,	1 3	
				,		\$	
50. Farm an	d fishing sup	olies, chemicals, and feed					
☑ No							
☐ Yes.							
			II II amelii II .			Φ	
51. Any farm	n- and comme	rcial fishing-related property you	did not already	list			
	Give specific						
mon	mation					\$	
		f all of your entries from Part 6, in umber here				\$	0.00
ioi i uic	o. write that i	umber nere			*		
Part 7:	Describe /	All Property You Own or Ha	ave an Inter	est in That	You Did Not List Above		
		perty of any kind you did not alre	eady list?				
Examples.  No	Season tickets,	country club membership					
	Give specific				***	\$	
	mation					\$	
	anning and a second				***	\$	
54 Add the	dollar value o	f all of your entries from Part 7. W	rite that number	r horo	4	\$	
on Aud the	dollar value o	ran or your entires nom rant 7. W	mic that numbe	i nere			
Part 8:	List the To	tals of Each Part of this F	orm				
55. Part 1: T	otal real estat	e, line 2			→	\$	0.00
56. Part 2: T	otal vehicles,	line 5	\$	3,000.00			
57. Part 3: T	otal personal	and household items, line 15	\$	850.00			
58. Part 4: T	otal financial	assets, line 36	\$	4,960.00			
59. Part 5: T	otal business			0.00			
60. Part 6: T	otal farm- and	related property, line 45	\$				
		related property, line 45 fishing-related property, line 52	\$ \$	0.00			
61. Part 7: T			\$ \$ +\$				
	otal other pro	fishing-related property, line 52		0.00	Copy personal property total 👈	+\$	8,810.00

## Case 17-24756-GLT Doc 17 Filed 12/21/17 Entered 12/21/17 21:05:14 Desc Main Document Page 13 of 68

Fill in this in	formation to iden	ntify your case:						
Debtor 1	Jeremy		Fisher					
	First Name	Middle Name	Last Name	-				
Debtor 2								
(Spouse, if filing)	First Name	Middle Name	Last Name	5				
United States	Bankruptcy Court for	the: Western District of F	Pennsylvania		8			
Case number	17-24756-GL	T				20	Check if this i	s ar
(If known)				4)		-	amended filin	(B) - 5769)

#### Official Form 106C

### Schedule C: The Property You Claim as Exempt

04/16

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Using the property you listed on *Schedule A/B: Property* (Official Form 106A/B) as your source, list the property that you claim as exempt. If more space is needed, fill out and attach to this page as many copies of *Part 2: Additional Page* as necessary. On the top of any additional pages, write your name and case number (if known).

For each item of property you claim as exempt, you must specify the amount of the exemption you claim. One way of doing so is to state a specific dollar amount as exempt. Alternatively, you may claim the full fair market value of the property being exempted up to the amount of any applicable statutory limit. Some exemptions—such as those for health aids, rights to receive certain benefits, and tax-exempt retirement funds—may be unlimited in dollar amount. However, if you claim an exemption of 100% of fair market value under a law that limits the exemption to a particular dollar amount and the value of the property is determined to exceed that amount, your exemption would be limited to the applicable statutory amount.

		and approadic statutory arms			
P	art 1: Identif	y the Property You Claim	as Exempt		
1.	☐ You are clai	cemptions are you claiming? ming state and federal nonban ming federal exemptions. 11 L	kruptcy exemptions. 11		
2.	For any proper	ty you list on Schedule A/B t	hat you claim as exem	pt, fill in the information below.	
		on of the property and line on that lists this property	Current value of the portion you own	Amount of the exemption you claim	Specific laws that allow exemption
			Copy the value from Schedule A/B	Check only one box for each exemption.	
	Brief description:	Ford F250	\$1,500.00	<b>\$</b>	11 USC 522(d)(2)
	Line from Schedule A/B:	3.1		✓ 100% of fair market value, up to any applicable statutory limit	
	Brief description:	Chevrolet Van	\$ <u>1,500.00</u>	□ s	11 USC 522(d)(8)
	Line from Schedule A/B:	32		✓ 100% of fair market value, up to any applicable statutory limit  ✓ 100% of fair market value, up to any applicable statutory limit  ✓ 100% of fair market value, up to any applicable statutory limit  ✓ 100% of fair market value, up to any applicable statutory limit  ✓ 100% of fair market value, up to any applicable statutory limit  ✓ 100% of fair market value, up to any applicable statutory limit  ✓ 100% of fair market value, up to any applicable statutory limit  ✓ 100% of fair market value, up to any applicable statutory limit  ✓ 100% of fair market value, up to any applicable statutory limit  ✓ 100% of fair market value, up to any applicable statutory limit  ✓ 100% of fair market value, up to any applicable statutory limit  ✓ 100% of fair market value, up to any applicable statutory limit  ✓ 100% of fair market value, up to any applicable statutory limit  ✓ 100% of fair market value, up to any applicable statutory limit  ✓ 100% of fair market value, up to any applicable statutory limit  ✓ 100% of fair market value, up to any applicable statutory limit  ✓ 100% of fair market value, up to any applicable statutory limit  ✓ 100% of fair market value, up to any applicable statutory limit  ✓ 100% of fair market value, up to any applicable statutory limit  ✓ 100% of fair market value, up to any applicable statutory limit  ✓ 100% of fair market value, up to any applicable statutory limit  ✓ 100% of fair market value, up to any applicable statutory limit  ✓ 100% of fair market value, up to any applicable statutory limit  ✓ 100% of fair market value, up to any applicable statutory limit  ✓ 100% of fair market value, up to any applicable statutory limit  ✓ 100% of fair market value, up to any applicable statutory limit  ✓ 100% of fair market value, up to any applicable statutory limit  ✓ 100% of fair market value, up to any applicable statutory limit  ✓ 100% of fair market value, up to any applicable statutory limit  ✓ 100% of fair market value statutory limit  ✓ 100% of fair market value statutory limit  ✓ 100% o	
	Brief description:	Computer/cell phone	\$ 500.00	\$ \$ 100% of fair market value, up to	11 USC 522(d)(3)
	Line from Schedule A/B:	7		any applicable statutory limit	
3.		ng a homestead exemption o		s filed on or after the date of adjustment.	
	☑ No				
	Yes. Did you	acquire the property covered	by the exemption within	1,215 days before you filed this case?	
	☐ Yes				

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Debtor 1

Jeremy Fisher Case number (if known) 17-24756-GLT

#### t 2: Additional Page

	on of the property and line /B that lists this property	Current value of the portion you own	Amount of the exemption you claim	Specific laws that allow exemption
		Copy the value from Schedule A/B	Check only one box for each exemption	
Brief description:	personal clothing	\$350.00	<u> </u>	11 USC (d)(3)
Line from Schedule A/B:	<u>11</u>		√ 100% of fair market value, up to any applicable statutory limit  √ 100% of fair market value, up to any applicable statutory limit  √ 100% of fair market value, up to any applicable statutory limit  √ 100% of fair market value, up to any applicable statutory limit  √ 100% of fair market value, up to any applicable statutory limit  √ 100% of fair market value, up to any applicable statutory limit  √ 100% of fair market value, up to any applicable statutory limit  √ 100% of fair market value, up to any applicable statutory limit  √ 100% of fair market value, up to any applicable statutory limit  √ 100% of fair market value, up to any applicable statutory limit  √ 100% of fair market value and the fair mark	
Brief description:	cash	\$60.00	<b>∡</b> \$60.00	11 USC (d)(8)
Line from Schedule A/B:	16		☐ 100% of fair market value, up to any applicable statutory limit	
Brief description:	Wesbanco account	\$900.00	<b>⊴</b> \$900.00	11 USC (d)(8)
Line from Schedule A/B:	<u>17</u>		☐ 100% of fair market value, up to any applicable statutory limit	
Brief description:	equipment rental	\$1,500.00	<b>☑</b> \$1,500.00	11 USC (d)(8)
Line from Schedule A/B:	30		☐ 100% of fair market value, up to any applicable statutory limit	
Brief description:	construction claim	\$2,000.00	<b>☑</b> \$ 2,000.00 □ 100% of fair market value, up to	11 USC (d)(8)
Line from Schedule A/B:	33		any applicable statutory limit	
Brief description:		\$	<b>-</b> \$	
Line from Schedule A/B:			☐ 100% of fair market value, up to any applicable statutory limit	
Brief description:	,	\$	<b>\$</b>	
Line from Schedule A/B:			☐ 100% of fair market value, up to any applicable statutory limit	
Brief description:	· · · · · · · · · · · · · · · · · · ·	\$	□ \$ □ 100% of fair market value, up to	
Line from Schedule A/B:			any applicable statutory limit	
Brief description:	1	\$	<b>\_</b> \$	
Line from Schedule A/B:			■ 100% of fair market value, up to any applicable statutory limit	
Brief description:	·	\$	<b>□</b> \$	
Line from Schedule A/B:			☐ 100% of fair market value, up to any applicable statutory limit	
Brief description:		\$	\$\$ 100% of fair market value, up to	
Line from Schedule A/B:			any applicable statutory limit	
Brief description:	-	\$	□ s	
Line from Schedule A/B:			☐ 100% of fair market value, up to any applicable statutory limit	

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Fill in this	information to identify	your case:	The Landson				
220 910 10	loromy		Fisher				
Debtor 1	Jeremy First Name	Middle Name	Last Name				
Debtor 2 (Spouse, if filing	D) First Name	Middle Name	Last Name				
3.0 %	The Successive Control of the Contro						
United States	Bankruptcy Court for the:	Western District of	Pennsylvania				140
Case numbe (If known)	17-24756-GLT					☐ Check	if this is an
3500 0015000000						amende	ed filing
0.65	1000						
Опісіа	Form 106D						
Sche	dule D: Cred	ditors Wh	o Have Clai	ms Secure	d by Pro	perty	12/15
Be as com	plete and accurate as n	ossible. If two ma	rried people are filing to	ogether, both are eg	ually responsible	for supplying correc	t
information	n. If more space is need	ded, copy the Add	itional Page, fill it out, n				
additional	pages, write your name	and case numbe	r (if known).				
1 Do any c	reditors have claims se	ecured by your pr	onerty?				
			ourt with your other sched	tules. You have nothin	na else to report on	this form	
	Fill in all of the information		out with your other sched	idles. Tou have nothii	ig else to report on	uns ioiii.	
_ 100.	i iii iii dii oi tile iiiioiiiidte	on below.					
Part 1:	ist All Secured Clair	ms					
NAMES OF PARTY OF					Column A	Column B	Column C
			one secured claim, list the		Amount of claim	Value of collateral	Unsecured
			cular claim, list the other or order according to the cree		Do not deduct the	that supports this claim	portion
	ao poconsio, not trio ciam	no in dipridectical c	radi addording to the die	altor o marrio.	value of collateral.	Ciaiii	If any
2.1		Describ	e the property that secure	es the claim:	\$	s	\$
Creditor's N	lame				6		
Number	Street						
		As of th	e date you file, the claim	is: Check all that apply.			
-		Cont					
-		Unlic	quidated				
City	State ZI	P Code Disp	uted				
Who owes	the debt? Check one.	Nature of	of lien. Check all that apply.				
Debtor			greement you made (such as	s mortgage or secured			
Debtor		car le	oan) utory lien (such as tax lien, m	echanic's lian)			
	1 and Debtor 2 only one of the debtors and ano		ment lien from a lawsuit	echanic's neny			
		-	er (including a right to offset)				
	if this claim relates to a unity debt						
	was incurred	Last 4 d	ligits of account number			AT AN EXPLORATION AND A STATE OF THE STATE O	
2.2	•	Describ	e the property that secure	es the claim:	\$	\$	\$
Creditor's N	lame	f					
						4	
Number	Street	As of th	e date you file, the claim	in. Chack all that apply			
		— Conf		is: Check all that apply.			
		Unlic					
City	State ZI	P Code Disp					
Who owes	the debt? Check one.	Nature o	of lien. Check all that apply.				
☐ Debtor	1 only		greement you made (such as	s mortgage or secured			
☐ Debtor	2 only	_ car l	oan)				
			71 72 72	4 4 4 4			
	1 and Debtor 2 only		utory lien (such as tax lien, m	echanic's lien)			
☐ At least	1 and Debtor 2 only one of the debtors and ano	ther	utory lien (such as tax lien, m gment lien from a lawsuit er (including a right to offset)				

0.00

Last 4 digits of account number

Add the dollar value of your entries in Column A on this page. Write that number here:

community debt

Date debt was incurred

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			Document 1 age 10 of 00	
Fill in t	his information to identif	y your case:		
	loromy		Fisher	
Debtor 1	Jeremy First Name	Middle Name	Last Name .	
Debtor 2	if filing) First Name	Middle Name	Last Name	
			Amazaran Deus (Co.)	
United S	tates Bankruptcy Court for the	: Western District	of Pennsylvania	☐ Check if this is an
Case nu (If known)				amended filing
Offici	al Form 106E/F	<b>3</b>		
12.10.10.10.10.10.10.10.10.10.10.10.10.10.		_	Who Have Unsecured Claims	12/15
A/B: Projected its control of the co	other party to any execut perty (Official Form 106A with partially secured c	ory contracts or VB) and on Scheo laims that are list fill it out, number name and case n	Section and Characteristics and Co.	tracts on <i>Schedule</i> G). Do not include any f more space is
100 Jan 100 100 100 100 100 100 100 100 100 10		27 27 24	181 192 AG	
_	ny creditors have priority o. Go to Part 2.	unsecured clain	is against you?	
<b>1</b> Y				
each nonpr unsec	claim listed, identify what to riority amounts. As much a cured claims, fill out the Co	ype of claim it is. I s possible, list the entinuation Page o	reditor has more than one priority unsecured claim, list the creditor separal factaim has both priority and nonpriority amounts, list that claim here and claims in alphabetical order according to the creditor's name. If you have if Part 1. If more than one creditor holds a particular claim, list the other creditors for this form in the instruction booklet.)	show both priority and more than two priority ditors in Part 3.
			Total claim	Priority Nonpriority amount amount
2.1 Int	ernal Revenue Servi	ne.	Last 4 digits of account number 7 3 9 9 \$ 0.00	\$ 0.00 \$ 0.00
Priori	ity Creditor's Name			
Numi	solvency Unit		When was the debt incurred?	
	00 Liberty Avenue St	uite 711B	- As of the date you file, the claim is: Check all that apply	
Pit		PA 15222	- Contingent	
	Sta		✓ Unliquidated	
200	o incurred the debt? Check Debtor 1 only	one.	☐ Disputed	
	Debtor 2 only		Type of PRIORITY unsecured claim:	
	Debtor 1 and Debtor 2 only		☐ Domestic support obligations	
	At least one of the debtors and		✓ Taxes and certain other debts you owe the government	
	Check if this claim is for a	community debt	☐ Claims for death or personal injury while you were	
	ne claim subject to offset?		intoxicated	
			Other. Specify	
			Last 4 digits of account number 7 3 9 9 s 0.00	s 0.00 s 0.00
	epartment of Revenue ity Creditor's Name	;	The state of the s	\$\$0.00
-			When was the debt incurred?	
Num P(	ber Street D Box 280946		As of the date you file, the claim is: Check all that apply	
-		οΛ 17120	Contingent	
City	arrisburg F	PA 17128 Ite ZIP Code	Unliquidated	
	o incurred the debt? Check		☐ Disputed	
200	Debtor 1 only	uzeliši:	Type of PRIORITY uncongred claims	
	Debtor 2 only		Type of PRIORITY unsecured claim:	
	Debtor 1 and Debtor 2 only		☐ Domestic support obligations ☐ Taxes and certain other debts you owe the government	
	At least one of the debtors and		Claims for death or personal injury while you were	
	Check if this claim is for a	community debt	interviented	

Other. Specify

☐ No☐ Yes

Is the claim subject to offset?

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		00 17	Document	3		
Debto	or 1 Jeremy First Name Middle Name	Last Name	Fisher	Case number (if known) 17-24756-GLT		
Part	List All of Your NONPRIORIT	ry Uns	ecured Claims			
3. D	o any creditors have nonpriority unse	cured cl	aims against you	1?		
Ē	No. You have nothing to report in this p	part. Sub	mit this form to th	e court with your other schedules.		
La.	<b>4</b> Yes					
n ir	onpriority unsecured claim, list the creditor	or separa or holds a	ately for each clain	order of the creditor who holds each claim. If a creditor has n. For each claim listed, identify what type of claim it is. Do not list the other creditors in Part 3.If you have more than three no	t list cla	ims already
	and the continuation rage of ran	. ~.			Tota	al claim
4.1	Credit Management Company Nonpriority Creditor's Name			Last 4 digits of account number 6 6 9 3	s	1,412.00
	2121 Noblestown Road			When was the debt incurred? 09/26/2012		
	Number Street			- Annual Control of the Control of t		
		PA	15205	Acceptable along the Aboratories in Observation to the Aboratories in Observation		
	City	tate	ZIP Code	As of the date you file, the claim is: Check all that apply.		
	Who incurred the debt? Check one.			Contingent		
	Debtor 1 only			☐ Unliquidated☐ Disputed		
	Debtor 2 only			- Disputed		
	☐ Debtor 1 and Debtor 2 only			Type of NONPRIORITY unsecured claim:		
	At least one of the debtors and another			☐ Student loans		
	☐ Check if this claim is for a community	y debt		Obligations arising out of a separation agreement or divorce		
	Is the claim subject to offset?			that you did not report as priority claims  Debts to pension or profit-sharing plans, and other similar debts	3	
	☑ No			✓ Other. Specify medical bills		
	Yes					
4.2	W.C. Resellers, Inc.			Last 4 digits of account number	\$	3,101.88
	Nonpriority Creditor's Name			When was the debt incurred? 04/09/2013		
	115 Herman Road					
	Number Street	9785		As of the date you file, the claim is: Check all that apply.		
		PA tate	16002 ZIP Code			
		ate	ZIP Code	Contingent		
	Who incurred the debt? Check one.			☐ Unliquidated☐ Disputed		
	Debtor 1 only			- Disputed		
	☐ Debtor 2 only ☐ Debtor 1 and Debtor 2 only			Type of NONPRIORITY unsecured claim:		
	At least one of the debtors and another			☐ Student loans		
	☐ Check if this claim is for a community	v debt		<ul> <li>Obligations arising out of a separation agreement or divorce that you did not report as priority claims</li> </ul>		
	Is the claim subject to offset?			Debts to pension or profit-sharing plans, and other similar debts	3	
	☑ No			✓ Other. Specify trade debt		
	Yes					
4.3	Jefferson Hills Surgical Specialis	sts		Last 4 digits of account number 5 2 9 9	ę	1,585.00
	Nonpriority Creditor's Name			When was the debt incurred? 09/20/2017	*	The second secon
	1200 Brooks Lane, Ste 170					
		PA	15025	As af the date you file the glaim is Oberland that seek		
	The transfer of the second of	tate	ZIP Code	<ul> <li>As of the date you file, the claim is: Check all that apply.</li> </ul>		
	Who incurred the debt? Check one.			Contingent		
	Debtor 1 only			☐ Unliquidated☐ Disputed☐		
	☐ Debtor 2 only			- Disputed		

Type of NONPRIORITY unsecured claim:

Other. Specify medical treatment

Obligations arising out of a separation agreement or divorce that you did not report as priority claims

lacktriangledown Debts to pension or profit-sharing plans, and other similar debts

₩ No

☐ Yes

Debtor 1 and Debtor 2 only

Is the claim subject to offset?

☐ At least one of the debtors and another

 $oldsymbol{\square}$  Check if this claim is for a community debt

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Fisher

Case number (if known) 17-24756-GLT Your NONPRIORITY Unsecured Claims — Continuation Page Part 2: After listing any entries on this page, number them beginning with 4.4, followed by 4.5, and so forth. Total claim 4.4 Last 4 digits of account number 6 5 3 4 Butler Emergency Physicians Assoc 312.00 Nonpriority Creditor's Name 02/16/2013 When was the debt incurred? PO Box 3478 Number Street As of the date you file, the claim is: Check all that apply. Wescosville PA 18106 ZIP Code Contingent Unliquidated Who incurred the debt? Check one. Disputed Debtor 1 only Debtor 2 only Type of NONPRIORITY unsecured claim: Debtor 1 and Debtor 2 only ☐ Student loans At least one of the debtors and another Obligations arising out of a separation agreement or divorce that you did not report as priority claims Check if this claim is for a community debt Debts to pension or profit-sharing plans, and other similar debts ✓ Other Specify medical treatment Is the claim subject to offset? M No ☐ Yes 4.5 \$ 1,073.00 Last 4 digits of account number 2 4 5 2 Bay Area Credit Service Nonpriority Creditor's Name 08/09/2016 When was the debt incurred? PO Box 467600 Number As of the date you file, the claim is: Check all that apply. Atlanta GA 31146 State 7IP Code Contingent Unliquidated Who incurred the debt? Check one. Disputed Debtor 1 only Debtor 2 only Type of NONPRIORITY unsecured claim: Debtor 1 and Debtor 2 only Student loans At least one of the debtors and another Obligations arising out of a separation agreement or divorce that you did not report as priority claims Check if this claim is for a community debt Debts to pension or profit-sharing plans, and other similar debts Is the claim subject to offset? Other, Specify purchased debt M No ☐ Yes \$ 2,476.95 4.6 Last 4 digits of account number John W. Thrower, Inc. Nonpriority Creditor's Name 11/02/2017 When was the debt incurred? 1349 Barr Avenue Number As of the date you file, the claim is: Check all that apply. Pittsburgh 15205 PA Contingent Unliquidated Who incurred the debt? Check one. ☐ Disputed Debtor 1 only Debtor 2 only Type of NONPRIORITY unsecured claim: Debtor 1 and Debtor 2 only ☐ Student loans At least one of the debtors and another Obligations arising out of a separation agreement or divorce that you did not report as priority claims Check if this claim is for a community debt Debts to pension or profit-sharing plans, and other similar debts Other. Specify Trade Debt Is the claim subject to offset? M No ☐ Yes

Jeremy

Debtor 1

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Debto				Case number (if known) 17-24756-GLT	
	First Name Middle Name	Last Name			
Par	2: Your NONPRIORITY Unsec	ured Cla	aims — Continu	uation Page	
Afte	r listing any entries on this page, num	ber ther	n beginning with	1 4.4, followed by 4.5, and so forth.	Total claim
4.7	Jefferson Hospital			Last 4 digits of account number 8 7 8 9	\$ 4,234.60
	Nonpriority Creditor's Name			When was the debt incurred 2 04/17/2017	<u></u>
	PO Box 643054			When was the debt incurred? 04/17/2017	
	Number Street Pittsburgh	PA	15265	As of the date you file, the claim is: Check all that apply.	
		State	ZIP Code	Contingent	
				☐ Unliquidated	
	Who incurred the debt? Check one.			☐ Disputed	
	Debtor 1 only Debtor 2 only			Type of NONPRIORITY unsecured claim:	
	Debtor 1 and Debtor 2 only				
	☐ At least one of the debtors and another			<ul> <li>Student loans</li> <li>Obligations arising out of a separation agreement or divorce that</li> </ul>	
	☐ Check if this claim is for a communi	ty dobt		you did not report as priority claims	
		ty debt		Debts to pension or profit-sharing plans, and other similar debts	
	Is the claim subject to offset?  ✓ No			☑ Other Specify medical treatment	
	Yes				
	_ 103				
4.8		COMMENSOR PRODUCTS	30000000000000000000000000000000000000		
7.0	Jefferson Hospital			Last 4 digits of account number 2 1 9 1	\$ 8,238.65
	Nonpriority Creditor's Name			When was the debt incurred? 06/24/2017	
	PO Box 643054			when was the debt incurred?	
	Number Street Pittsburgh	PA	15264	As of the date you file, the claim is: Check all that apply.	
		State	ZIP Code	Contingent	
				☐ Unliquidated	
	Who incurred the debt? Check one.			☐ Disputed	
	Debtor 1 only Debtor 2 only			Type of NONPRIORITY unsecured claim:	
	Debtor 1 and Debtor 2 only			☐ Student loans	
	☐ At least one of the debtors and another			Obligations arising out of a separation agreement or divorce that	
	☐ Check if this claim is for a communi	ty debt		you did not report as priority claims	
	Is the claim subject to offset?			☐ Debts to pension or profit-sharing plans, and other similar debts ☐ Other. Specify medical treatment	
	✓ No			Unier. Specify Thousand Godding.	
	Yes				
	erentere en antiquation de la company de				\$ 1,180.87
4.9	State Callection Service Inc			Last 4 digits of account number 6 7 7 3	\$_1,100.07
	State Collection Service Inc.  Nonpriority Creditor's Name			00/20/2017	
	PO Box 6260			When was the debt incurred? 09/29/2017	
	Number Street		60746	As of the date you file, the claim is: Check all that apply.	
	- Committee - Comm	WI State	63716 ZIP Code	Contingent	
		अकारती ।		☐ Unliquidated	
	Who incurred the debt? Check one.			☐ Disputed	
	Debtor 1 only			To a CHONDRIODITY uncertainty	
	☐ Debtor 2 only ☐ Debtor 1 and Debtor 2 only			Type of NONPRIORITY unsecured claim:	
	☐ Debtor 1 and Debtor 2 only ☐ At least one of the debtors and another			Student loans	
				<ul> <li>Obligations arising out of a separation agreement or divorce that you did not report as priority claims</li> </ul>	
	☐ Check if this claim is for a communi	ity debt		Debts to pension or profit-sharing plans, and other similar debts	
	Is the claim subject to offset?			✓ Other. Specify <u>collection account</u>	
	☑ No				
	☐ Yes				

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Debtor	1 Jeremy First Name Middle Name	Fisher		Case number (#known)_17-24756-GLT		
Part	2: Your NONPRIORITY Unsec	ured Cla	aims — Continua	ation Page		
After	listing any entries on this page, nur	nber ther	n beginning with	4.4, followed by 4.5, and so forth.	Tot	al claim
5.0	Bridgestone Hosepower LLC			Last 4 digits of account number 6 4 3 1	\$	499.55
1	PO Box 861777			When was the debt incurred? $\frac{01/04/2017}{}$		
	Number Street Orlando	FL	32886	As of the date you file, the claim is: Check all that apply.		
2	Dity	State	ZIP Code	Contingent		
٧	Who incurred the debt? Check one.			☐ Unliquidated ☐ Disputed		
Ţ	Debtor 1 only			- Disputed		
	Debtor 2 only			Type of NONPRIORITY unsecured claim:		
	Debtor 1 and Debtor 2 only			☐ Student loans		
	At least one of the debtors and another			Obligations arising out of a separation agreement or divorce that		
	☐ Check if this claim is for a commun	ity debt		you did not report as priority claims  Debts to pension or profit-sharing plans, and other similar debts		
	s the claim subject to offset?			✓ Other. Specify_trade debt		
	No No					
E	Yes					
5.1	Allegheny Health Network			Last 4 digits of account number 3 2 0 8	\$	296.30
	Ionpriority Creditor's Name			00/12/2017		
1	PO Box 645266			When was the debt incurred? 06/13/2017		
	lumber Street	DA	15264	As of the date you file, the claim is: Check all that apply.		
	Pittsburgh Sity	PA State	ZIP Code	Contingent		
		Cidio		☐ Unliquidated		
٧	Who incurred the debt? Check one.			☐ Disputed		
	Debtor 1 only					
	Debtor 2 only			Type of NONPRIORITY unsecured claim:		
and the same of th	Debtor 1 and Debtor 2 only  At least one of the debtors and another			☐ Student loans		
	At least one of the deptors and another			<ul> <li>Obligations arising out of a separation agreement or divorce that you did not report as priority claims</li> </ul>		
Į	Check if this claim is for a commun	ity debt		Debts to pension or profit-sharing plans, and other similar debts		
	s the claim subject to offset?			✓ Other Specify medical treatment		
	<b>⊿</b> No					
	Yes					
5.2		OTTO DEPOSIT STATE OF THE STATE	***********		\$	91.10
	Dr M Mostoufizadeh MD PC			Last 4 digits of account number 6 7 4 9	<b>\$</b>	01.10
	Nonpriority Creditor's Name PO Box 9078			When was the debt incurred? 10/21/2016		
1	lumber Street			As of the date you file, the claim is: Check all that apply.		
	Pittsburgh	PA	15224			
C	City	State	ZIP Code	☐ Contingent ☐ Unliquidated		
٧	Who incurred the debt? Check one.			☐ Disputed		
	Debtor 1 only			F		
	Debtor 2 only			Type of NONPRIORITY unsecured claim:		
	Debtor 1 and Debtor 2 only		<b>带</b> 。	☐ Student loans		
	At least one of the debtors and another			Obligations arising out of a separation agreement or divorce that		
C	Check if this claim is for a commun	ity debt		you did not report as priority claims  Debts to pension or profit-sharing plans, and other similar debts		
l:	s the claim subject to offset?			Other. Specify medical treatment		

☑ No ☐ Yes

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Debtor		1 120	Fisher	Case number (if known) 17-24756-GLT	<u></u>
	First Name Middle Name	Last Nam	e		
Part :	2: Your NONPRIORITY Unse	cured C	laims — Continua	ation Page	
After I	listing any entries on this page, nu	mber the	m beginning with	4.4. followed by 4.5. and so forth.	Total claim
_	, and the second			*	
.3					
	Crystal Concrete Supply onpriority Creditor's Name			Last 4 digits of account number	\$_1,756.5
	238 Tower Road			When was the debt incurred? 10/31/2017	
	umber Street				
5	Saxonburg	PA	16056	As of the date you file, the claim is: Check all that apply.	
C	ity	State	ZIP Code	☐ Contingent	
v	Who incurred the debt? Check one.			Unliquidated	
	Debtor 1 only			Disputed	
	Debtor 2 only			Type of NONPRIORITY unsecured claim:	
	Debtor 1 and Debtor 2 only			☐ Student loans	
	At least one of the debtors and another			<ul> <li>Obligations arising out of a separation agreement or divorce that</li> </ul>	
	Check if this claim is for a commu	nity debt		you did not report as priority claims	
		inty debt		Debts to pension or profit-sharing plans, and other similar debts	
	s the claim subject to offset?  No			Other. Specify Trade Debt	
	☑ No ☑ Yes			4	
_	<b>⊒</b> 1€8				
.4					AND THE RESIDENCE OF THE PERSON OF THE PERSO
	Montgomery Block Works, LLC	<u>.</u>		Last 4 digits of account number	\$ 5,310.0
	onpriority Creditor's Name				
2	238 Tower Road			When was the debt incurred?	
	umber Street	DA	10050	As of the date you file, the claim is: Check all that apply.	
	Saxonburg	PA	16056 ZIP Code	Contingent	
0	5	Otato	211 0000	☐ Unliquidated	
V	Who incurred the debt? Check one.			☐ Disputed	
	Debtor 1 only				
	Debtor 2 only			Type of NONPRIORITY unsecured claim:	
	Debtor 1 and Debtor 2 only			☐ Student loans	
_	At least one of the debtors and another			<ul> <li>Obligations arising out of a separation agreement or divorce that you did not report as priority claims</li> </ul>	
	Check if this claim is for a commu	nity debt		Debts to pension or profit-sharing plans, and other similar debts	
Is	s the claim subject to offset?			Other. Specify Trade Debt	
6	<b>∕</b> No				
	Yes				
.5		A \$110 alou 4 4 4 5 5 5 5 5 5 6 5 6 6 6 6 6 6 6 6 6			s 23.7
_	JPMC Health Services			Last 4 digits of account number 3 6 4 0	<u></u>
	Ionpriority Creditor's Name			When was the debt incurred? 10/12/2017	
	PO Box 371472			When was the debt incurred? 10/12/2017	
	lumber Street	DΛ	15250	As of the date you file, the claim is: Check all that apply.	
_	Pittsburgh	PA State	15250 ZIP Code	☐ Contingent	
		- Line		☐ Unliquidated	
٧	Who incurred the debt? Check one.			☐ Disputed	
Ę.	Debtor 1 only			77 9447704 4411140414141	
	Debtor 2 only			Type of NONPRIORITY unsecured claim:	
	Debtor 1 and Debtor 2 only			☐ Student loans	
L	At least one of the debtors and another			Obligations arising out of a separation agreement or divorce that	
	Check if this claim is for a commu	nity debt		you did not report as priority claims  Debts to pension or profit-sharing plans, and other similar debts	
Is	s the claim subject to offset?			Other. Specify medical treatment	
	<b>1</b> No			20 (7 ) (7 ) (7 ) (7 ) (7 ) (7 ) (7 ) (7	
	Yes				

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Case number (if known) 17-24756-GLT Jeremy Fisher Debtor 1 Part 2: Your NONPRIORITY Unsecured Claims - Continuation Page After listing any entries on this page, number them beginning with 4.4, followed by 4.5, and so forth. Total claim 5.6 Last 4 digits of account number s 1,949.28 UPMC Life Changing Medicine Nonpriority Creditor's Name 02/14/2017 When was the debt incurred? 2 Hot Metal St. Room 386 Street As of the date you file, the claim is: Check all that apply. Pittsburgh 15203 PA ☐ Contingent ZIP Code ■ Unliquidated Who incurred the debt? Check one. ☐ Disputed Debtor 1 only Debtor 2 only Type of NONPRIORITY unsecured claim: Debtor 1 and Debtor 2 only ☐ Student loans At least one of the debtors and another Obligations arising out of a separation agreement or divorce that you did not report as priority claims Check if this claim is for a community debt Debts to pension or profit-sharing plans, and other similar debts ☑ Other. Specify medical treatment Is the claim subject to offset? M No ☐ Yes 5.7 \$ 3,175.00 Last 4 digits of account number \_\_\_ \_\_ \_\_\_ Manfred M. Fisher Nonpriority Creditor's Name When was the debt incurred? 728 Smith Street Street As of the date you file, the claim is: Check all that apply. McKeesport PA 15133 ZIP Code Contingent ■ Unliquidated Who incurred the debt? Check one. ☐ Disputed Debtor 1 only Debtor 2 only Type of NONPRIORITY unsecured claim: Debtor 1 and Debtor 2 only ☐ Student loans At least one of the debtors and another Obligations arising out of a separation agreement or divorce that you did not report as priority claims Check if this claim is for a community debt Debts to pension or profit-sharing plans, and other similar debts Is the claim subject to offset? Other. Specify\_ No No ☐ Yes s 7,454.75 5.8 Last 4 digits of account number **Sherwin Williams** Nonpriority Creditor's Name When was the debt incurred? 357 Northgate Drive Number As of the date you file, the claim is: Check all that apply. 15086 Warrendale PA ZIP Code Contingent ■ Unliquidated Who incurred the debt? Check one. Disputed Debtor 1 only Type of NONPRIORITY unsecured claim: Debtor 2 only Debtor 1 and Debtor 2 only ☐ Student loans At least one of the debtors and another Obligations arising out of a separation agreement or divorce that you did not report as priority claims ☐ Check if this claim is for a community debt ☐ Debts to pension or profit-sharing plans, and other similar debts Is the claim subject to offset? Other. Specify trade debt No No Yes

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Case number (if known) 17-24756-GLT Fisher Debtor 1 Part 2: Your NONPRIORITY Unsecured Claims - Continuation Page After listing any entries on this page, number them beginning with 4.4, followed by 4.5, and so forth. Total claim 6.2 Last 4 digits of account number **OEC Rentals** \$ 25,111.40 Nonpriority Creditor's Name When was the debt incurred? PO Box 177 Number As of the date you file, the claim is: Check all that apply. Oakdale PA 15071 ZIP Code State ☐ Contingent Unliquidated Who incurred the debt? Check one. Disputed Debtor 1 only Debtor 2 only Type of NONPRIORITY unsecured claim: Debtor 1 and Debtor 2 only ☐ Student loans At least one of the debtors and another Obligations arising out of a separation agreement or divorce that you did not report as priority claims ☐ Check if this claim is for a community debt Debts to pension or profit-sharing plans, and other similar debts Is the claim subject to offset? Other. Specify trade debt M No ☐ Yes 6.3 \$ 1,392.00 Last 4 digits of account number South Pittsburgh Anasthesia Associates When was the debt incurred? 1699 Washington Road As of the date you file, the claim is: Check all that apply. Pittsburgh PA 15228 Contingent ■ Unliquidated Who incurred the debt? Check one. ☐ Disputed Debtor 1 only Debtor 2 only Type of NONPRIORITY unsecured claim: Debtor 1 and Debtor 2 only Student loans At least one of the debtors and another Obligations arising out of a separation agreement or divorce that you did not report as priority claims ☐ Check if this claim is for a community debt Debts to pension or profit-sharing plans, and other similar debts Is the claim subject to offset? ✓ Other. Specify medical treatment M No ☐ Yes 774.61 6.4 Last 4 digits of account number \_ Crystal Concrete Supply Nonpriority Creditor's Name When was the debt incurred? 238 Tower Road As of the date you file, the claim is: Check all that apply. 16056 PA Saxonburg ZIP Code Contingent State ☐ Unliquidated Who incurred the debt? Check one. Disputed Debtor 1 only Type of NONPRIORITY unsecured claim: Debtor 2 only Debtor 1 and Debtor 2 only Student loans At least one of the debtors and another Obligations arising out of a separation agreement or divorce that you did not report as priority claims ☐ Check if this claim is for a community debt Debts to pension or profit-sharing plans, and other similar debts

Other. Specify trade debt

☑ No ☐ Yes

Is the claim subject to offset?

Case 17-24756-GLT Doc 17 Filed 12/21/17 Entered 12/21/17 21:05:14 Desc Main Document Page 24 of 68 Case number (if known) 17-24756-GLT Jeremy Fisher Debtor 1 Part 2: Your NONPRIORITY Unsecured Claims - Continuation Page After listing any entries on this page, number them beginning with 4.4, followed by 4.5, and so forth. **Total claim** 5.9 Last 4 digits of account number Atlas Clay & Metal Products s 6,244.74 Nonpriority Creditor's Name 07/21/2015 When was the debt incurred? 2034 Chateau Street Number Street As of the date you file, the claim is: Check all that apply. Pittsburgh PA 15233 ZIP Code ✓ Contingent ☐ Unliquidated Who incurred the debt? Check one. Disputed Debtor 1 only Debtor 2 only Type of NONPRIORITY unsecured claim: Debtor 1 and Debtor 2 only ☐ Student loans ☐ At least one of the debtors and another Obligations arising out of a separation agreement or divorce that you did not report as priority claims ☐ Check if this claim is for a community debt Debts to pension or profit-sharing plans, and other similar debts Is the claim subject to offset? ✓ Other. Specify trade debt M No ☐ Yes 6.0 \$ 35,000.00 Last 4 digits of account number Joanna Waldsmith Nonpriority Creditor's Name 05/04/2015 When was the debt incurred? 464 Williams Street Number Street As of the date you file, the claim is: Check all that apply. Pittsburgh PA 15211 State ZIP Code ☐ Contingent ✓ Unliquidated Who incurred the debt? Check one. ✓ Disputed Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another ☐ Check if this claim is for a community debt Is the claim subject to offset? M No ☐ Yes 6.1 M & M Creative Laminates Nonpriority Creditor's Name 4 5th Avenue Number Sharpsburg Who incurred the debt? Check one.

	Type of NONPRIORITY unsecured claim:  ☐ Student loans ☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims ☐ Debts to pension or profit-sharing plans, and other similar debts ☐ Other. Specify Construction claim	
	Last 4 digits of account number	\$_7,504.36
	When was the debt incurred? 05/25/2017	
15215	As of the date you file, the claim is: Check all that apply.	
ZIP Code	✓ Contingent Unliquidated Disputed	
	Type of NONPRIORITY unsecured claim:	
	<ul> <li>☐ Student loans</li> <li>☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims</li> </ul>	
	<ul> <li>□ Debts to pension or profit-sharing plans, and other similar debts</li> <li>☑ Other. Specify trade debt</li> </ul>	

M No ☐ Yes

Debtor 1 only Debtor 2 only

Debtor 1 and Debtor 2 only

Is the claim subject to offset?

At least one of the debtors and another

☐ Check if this claim is for a community debt

### Case 17-24756-GLT Doc 17 Filed 12/21/17 Entered 12/21/17 21:05:14 Desc Main Document Page 25 of 68

Case number (if known) 17-24756-GLT Fisher Jeremy Debtor 1 Part 2: Your NONPRIORITY Unsecured Claims - Continuation Page After listing any entries on this page, number them beginning with 4.4, followed by 4.5, and so forth. Total claim 6.5 Last 4 digits of account number 0.00 Darrell & Christine Pratz c/o Kathleen Charlton Nonpriority Creditor's Name When was the debt incurred? 617 S. Pike Road As of the date you file, the claim is: Check all that apply. Sarver PA 16055 State ZIP Code Contingent ✓ Unliquidated Who incurred the debt? Check one. Disputed Debtor 1 only Debtor 2 only Type of NONPRIORITY unsecured claim: Debtor 1 and Debtor 2 only ■ Student loans At least one of the debtors and another Obligations arising out of a separation agreement or divorce that you did not report as priority claims ☐ Check if this claim is for a community debt Debts to pension or profit-sharing plans, and other similar debts Is the claim subject to offset? ✓ Other. Specify trade claim M No ☐ Yes 6.6 \$ 75,857.00 Last 4 digits of account number Steven & Edith Sutton Nonpriority Creditor's Name 07/01/2015 When was the debt incurred? 526 Mercer Road As of the date you file, the claim is: Check all that apply. 16001 Butler PA ZIP Code Contingent Unliquidated Who incurred the debt? Check one. ✓ Disputed Debtor 1 only Type of NONPRIORITY unsecured claim: Debtor 2 only Debtor 1 and Debtor 2 only ☐ Student loans At least one of the debtors and another Obligations arising out of a separation agreement or divorce that you did not report as priority claims Check if this claim is for a community debt Debts to pension or profit-sharing plans, and other similar debts Is the claim subject to offset? Other Specify contruction claim M No ☐ Yes s 14,000.0m 6.7 Last 4 digits of account number Santander Bank Nonpriority Creditor's Name When was the debt incurred? 75 State Street Number As of the date you file, the claim is: Check all that apply 20109 **Boston** MA ZIP Code Contingent Unliquidated Who incurred the debt? Check one. Disputed Debtor 1 only Type of NONPRIORITY unsecured claim: Debtor 2 only Debtor 1 and Debtor 2 only ☐ Student loans At least one of the debtors and another Obligations arising out of a separation agreement or divorce that you did not report as priority claims ☐ Check if this claim is for a community debt Debts to pension or profit-sharing plans, and other similar debts ✓ Other Specify deficiency claim Is the claim subject to offset? ☐ No ☐ Yes

## Case 17-24756-GLT Doc 17 Filed 12/21/17 Entered 12/21/17 21:05:14 Desc Main Document Page 26 of 68

Debtor 1

Jeremy

Middle Name

Fisher

Case number (if known) 17-24756-GLT

Part 3: List Others to Be Notified About a Debt That You Already Listed

Andre Menchyk			On which entry in Part 1 or Part 2 did you list the original creditor?
	de IIID		Line 6.6 of (Check one): ☐ Part 1: Creditors with Priority Unsecured Claims
Stepanian & Menchy	yk, LLP		✓ Part 2: Creditors with Nonpriority Unsecured Claims
222 South Main Stre	eet		at 2. Oreators with World Orisectated Oranic
Butler	PA State	16001 ZIP Code	Last 4 digits of account number
Joseph P. Nigro, Es		ZIP Code	On which entry in Part 1 or Part 2 did you list the original creditor?
Nigro & Associates			Line of (Check one):  Part 1: Creditors with Priority Unsecured Claims
Number Street 1330 Old Freeport R	Road Suite 3BF	71	Part 2: Creditors with Nonpriority Unsecured Claims
Pittsburgh City	PA State	15238 ZIP Code	Last 4 digits of account number
			On which entry in Part 1 or Part 2 did you list the original creditor?
			Line of (Check one):  Part 1: Creditors with Priority Unsecured Claims
Number Street		29	Part 2: Creditors with Nonpriority Unsecured Claims
			Last 4 digits of account number
Dity.	State	ZIP Code	On which entry in Part 1 or Part 2 did you list the original creditor?
Name			Line of (Check one):  Part 1: Creditors with Priority Unsecured Claims
Number Street			Part 2: Creditors with Nonpriority Unsecured Claims
City	State	ZIP Code	Last 4 digits of account number
Name			On which entry in Part 1 or Part 2 did you list the original creditor?
tamo			Line of (Check one):  Part 1: Creditors with Priority Unsecured Claims
Number Street			☐ Part 2: Creditors with Nonpriority Unsecured
			Claims
Site.	(Accessed)	710.04	Last 4 digits of account number
City	State	ZIP Code	On which entry in Part 1 or Part 2 did you list the original creditor?
Name			Line of (Check one):  Part 1: Creditors with Priority Unsecured Claims
Number Street			Part 2: Creditors with Nonpriority Unsecured Claims
City	State	ZIP Code	Last 4 digits of account number
Name			On which entry in Part 1 or Part 2 did you list the original creditor?
3.000000			Line of (Check one):  Part 1: Creditors with Priority Unsecured Claims
Number Street			Part 2: Creditors with Nonpriority Unsecured Claims
City	State	ZIP Code	Last 4 digits of account number

# Case 17-24756-GLT Doc 17 Filed 12/21/17 Entered 12/21/17 21:05:14 Desc Main Document Page 27 of 68

Debtor 1

Jeremy

Middle No

Fisher

Case number (if known) 17-24756-GLT

Part 4:

Add the Amounts for Each Type of Unsecured Claim

6. Total the amounts of certain types of unsecured claims. This information is for statistical reporting purposes only. 28 U.S.C. § 159. Add the amounts for each type of unsecured claim.

			Total claim	
Total claims	6a. Domestic support obligations	6a.	\$	0.00
from Part 1	6b. Taxes and certain other debts you owe the government	6b.	\$	0.00
	6c. Claims for death or personal injury while you were intoxicated	6c.	\$	0.00
	6d. <b>Other.</b> Add all other priority unsecured claims. Write that amount here.	6d.	+_\$	211,055.41
	6e. <b>Total.</b> Add lines 6a through 6d.	6e.	\$	211,055.41
			Total claim	
Total claims	6f. Student loans	6f.	\$	0.00
from Part 2	6g. Obligations arising out of a separation agreement or divorce that you did not report as priority claims	6g.	\$	0.00
	6h. Debts to pension or profit-sharing plans, and other similar debts	6h.	\$	0.00
	Other. Add all other nonpriority unsecured claims.     Write that amount here.	6i.	+ \$	0.00
	6j. <b>Total.</b> Add lines 6f through 6i.	6j.	\$	0.00

### Case 17-24756-GLT Doc 17 Filed 12/21/17 Entered 12/21/17 21:05:14 Desc Main Document Page 28 of 68

Debtor	Jeremy Fishe	r	
	First Name	Middle Name	Last Name
Debtor 2		12.	
(Spouse If filing)	First Name	Middle Name	Last Name
United States	Bankruptcy Court for	the: Western District of P	ennsylvania

☐ Check if this is an amended filing

#### Official Form 106G

### **Schedule G: Executory Contracts and Unexpired Leases**

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the additional page, fill it out, number the entries, and attach it to this page. On the top of any additional pages, write your name and case number (if known).

- 1. Do you have any executory contracts or unexpired leases?
  - No. Check this box and file this form with the court with your other schedules. You have nothing else to report on this form.
  - Yes. Fill in all of the information below even if the contracts or leases are listed on Schedule A/B: Property (Official Form 106A/B).
- List separately each person or company with whom you have the contract or lease. Then state what each contract or lease is for (for
  example, rent, vehicle lease, cell phone). See the instructions for this form in the instruction booklet for more examples of executory contracts and
  unexpired leases.

Person or company with whom you have the contract or lease

State what the contract or lease is for

2.1	Yuriy Bekman			lease for 1385 Glencoe Avenue	
	Name				
	1379 Glencoe Ave	enue			
	Number Street	indo			
	Pittsburgh	PA	15205		
	City	State	ZIP Code		
2.2	Colosimo Auto Sa	les	MCL.1011.00000000000000000000000000000000	 lease for 2011 Audi	
	Name 1682 Evans City F	Road			
	Number Street			_	
	Evans City	PA	16033		
	City	State	ZIP Code		
2.3	***************************************				
ALAKSHIAAAAA	Name				
	Number Street			_	
	City	State	ZIP Code		
2.4					
	Name			_	
	Number Street			_	
	City	State	ZIP Code		24 62263 27077000000000000000000000000000000000
2.5					
	Name			_	
and the state of t	Number Street				
	City	State	ZIP Code	<u> </u>	

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Fill in this in	formation to ide	ntify your case:		
Debtor 1	Jeremy Fishe	r		
	First Name	Middle Name	Last Name	
Debtor 2				
(Spouse, if filing)	First Name	Middle Name	Last Name	
Case number	Bankruptcy Court fo	r the: Western District of Po LT	ennsylvania	
(If known)				

☐ Check if this is an amended filing

### Official Form 106H

### **Schedule H: Your Codebtors**

12/15

Codebtors are people or entities who are also liable for any debts you may have. Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the Additional Page, fill it out, and number the entries in the boxes on the left. Attach the Additional Page to this page. On the top of any Additional Pages, write your name and case number (if known). Answer every question.

number (if known). Answer	every question.		
o you have any codebtors	? (If you are filing a joint case, do no	t list either spouse as a	codebtor.)
Yes			
Vithin the last 8 years, have	e you lived in a community proper uisiana, Nevada, New Mexico, Puer		Community property states and territories include aton, and Wisconsin,)
No. Go to line 3.			,
	mer spouse, or legal equivalent live	with you at the time?	
□ No			
Yes. In which commu	nity state or territory did you live?	, Fi	Il in the name and current address of that person.
Name of your spouse, forme	er spouse, or legal equivalent		
Number Street			
City	State	ZIP Code	
Schedule D (Official Form 1	codebtor only if that person is a gu 06D), <i>Schedule E/F</i> (Official Form	uarantor or cosigner. I	Make sure you have listed the creditor on G (Official Form 106G). Use Schedule D,
shown in line 2 again as a d	codebtor only if that person is a gu 06D), <i>Schedule E/F</i> (Official Form	uarantor or cosigner. I	Make sure you have listed the creditor on
shown in line 2 again as a o Schedule D (Official Form 1 Schedule E/F, or Schedule	codebtor only if that person is a gu 06D), <i>Schedule E/F</i> (Official Form	uarantor or cosigner. I	Make sure you have listed the creditor on G (Official Form 106G). Use Schedule D,
shown in line 2 again as a of Schedule D (Official Form 1 Schedule E/F, or Schedule Column 1: Your codebtor	codebtor only if that person is a gu 06D), <i>Schedule E/F</i> (Official Form	uarantor or cosigner. I	Make sure you have listed the creditor on G (Official Form 106G). Use Schedule D, Column 2: The creditor to whom you owe the
shown in line 2 again as a o Schedule D (Official Form 1 Schedule E/F, or Schedule	codebtor only if that person is a gu 06D), <i>Schedule E/F</i> (Official Form	uarantor or cosigner. I	Make sure you have listed the creditor on G (Official Form 106G). Use Schedule D, Column 2: The creditor to whom you owe the Check all schedules that apply:
shown in line 2 again as a of Schedule D (Official Form 1 Schedule E/F, or Schedule Column 1: Your codebtor	codebtor only if that person is a gu 06D), <i>Schedule E/F</i> (Official Form	uarantor or cosigner. I	Make sure you have listed the creditor on G (Official Form 106G). Use Schedule D,  Column 2: The creditor to whom you owe the Check all schedules that apply:  Schedule D, line
shown in line 2 again as a of Schedule D (Official Form 1 Schedule E/F, or Schedule Column 1: Your codebtor	codebtor only if that person is a gu 06D), <i>Schedule E/F</i> (Official Form	uarantor or cosigner. I	Make sure you have listed the creditor on G (Official Form 106G). Use Schedule D,  Column 2: The creditor to whom you owe the Check all schedules that apply:  Schedule D, line  Schedule E/F, line
Schown in line 2 again as a control of the control	codebtor only if that person is a gu 06D), <i>Schedule E/F</i> (Official Form G to fill out Column 2.	uarantor or cosigner. I 106E/F), or Schedule	Make sure you have listed the creditor on G (Official Form 106G). Use Schedule D,  Column 2: The creditor to whom you owe the Check all schedules that apply:  Schedule D, line Schedule E/F, line Schedule G, line
Schown in line 2 again as a control of the control	codebtor only if that person is a gu 06D), <i>Schedule E/F</i> (Official Form G to fill out Column 2.	uarantor or cosigner. I 106E/F), or Schedule	Make sure you have listed the creditor on G (Official Form 106G). Use Schedule D,  Column 2: The creditor to whom you owe the Check all schedules that apply:  Schedule D, line Schedule E/F, line Schedule G, line
Schown in line 2 again as a of Schedule D (Official Form 1 Schedule E/F, or Schedule Column 1: Your codebtor  Name  Number Street  City	codebtor only if that person is a gu 06D), <i>Schedule E/F</i> (Official Form G to fill out Column 2.	uarantor or cosigner. I 106E/F), or Schedule	Make sure you have listed the creditor on G (Official Form 106G). Use Schedule D,  Column 2: The creditor to whom you owe the Check all schedules that apply:  Schedule D, line Schedule E/F, line Schedule D, line Schedule D, line
Schown in line 2 again as a of Schedule D (Official Form 1 Schedule E/F, or Schedule Column 1: Your codebtor  Name  Number Street	codebtor only if that person is a gu 06D), <i>Schedule E/F</i> (Official Form G to fill out Column 2.	uarantor or cosigner. I 106E/F), or Schedule	Make sure you have listed the creditor on G (Official Form 106G). Use Schedule D,  Column 2: The creditor to whom you owe the Check all schedules that apply:  Schedule D, line Schedule E/F, line Schedule G, line
Schown in line 2 again as a of Schedule D (Official Form 1 Schedule E/F, or Schedule Column 1: Your codebtor  Name  Number Street  City	codebtor only if that person is a gu 06D), <i>Schedule E/F</i> (Official Form G to fill out Column 2.	uarantor or cosigner. I 106E/F), or Schedule	Make sure you have listed the creditor on G (Official Form 106G). Use Schedule D,  Column 2: The creditor to whom you owe the Check all schedules that apply:  Schedule D, line Schedule E/F, line Schedule D, line Schedule D, line
Schown in line 2 again as a of Schedule D (Official Form 1 Schedule E/F, or Schedule Column 1: Your codebtor  Name  Number Street  City  Name	codebtor only if that person is a gu 06D), Schedule E/F (Official Form G to fill out Column 2.	uarantor or cosigner. I 106E/F), or Schedule  ZIP Code	Make sure you have listed the creditor on G (Official Form 106G). Use Schedule D,  Column 2: The creditor to whom you owe the Check all schedules that apply:  Schedule D, line Schedule E/F, line Schedule G, line Schedule D, line
Schown in line 2 again as a of Schedule D (Official Form 1 Schedule E/F, or Schedule Column 1: Your codebtor  Name  Number Street  City  Name	codebtor only if that person is a gu 06D), Schedule E/F (Official Form G to fill out Column 2.	uarantor or cosigner. I 106E/F), or Schedule  ZIP Code	Make sure you have listed the creditor on G (Official Form 106G). Use Schedule D,  Column 2: The creditor to whom you owe the Check all schedules that apply:  Schedule D, line Schedule E/F, line Schedule G, line Schedule E/F, line Schedule E/F, line Schedule G, line
Schown in line 2 again as a of Schedule D (Official Form 1 Schedule E/F, or Schedule Column 1: Your codebtor  Name  Number Street  City  Name  Number Street  City	codebtor only if that person is a gu 06D), Schedule E/F (Official Form G to fill out Column 2.	uarantor or cosigner. I 106E/F), or Schedule  ZIP Code	Make sure you have listed the creditor on G (Official Form 106G). Use Schedule D,  Column 2: The creditor to whom you owe the Check all schedules that apply:  Schedule D, line Schedule E/F, line Schedule G, line Schedule D, line

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Fill in this information to	Harare	NO. CO. DO. CO.			40	
Fill in this information to	identity your case:					
Debtor 1 Jeremy Fis	Sher Middle Name	Last Name				
Debtor 2	E					
(Spouse, if filing) First Name	Middle Name	Last Name				
17 24750	rt for the: Western District of Pennsy	Ivania				
Case number 17-24756	-JLI		e e	Check if t	10.151	
				Comment of the Commen	nended filing plement showing post	notition chapter 12
					e as of the following d	
Official Form 106I				MM / [	DD / YYYY	
Schedule I:	Your Income					12/15
supplying correct informat If you are separated and yo	ate as possible. If two married perion. If you are married and not fill bur spouse is not filing with you, and the top of any additional paraphoyment	ing jointly, and you do not include info	r spouse is rmation ab	living with	you, include informatio	n about your spouse. eeded, attach a
Fill in your employment information.	i	Debtor 1			Debtor 2 or non-fi	ling spouse
If you have more than on attach a separate page w information about addition employers.	vith	☐ Employed ☐ Not employed	d		☐ Employed ☐ Not employed	
Include part-time, seasor	nal, or					
self-employed work.  Occupation may include or homemaker, if it applie		Construction				
, , , , , , , , , , , , , , , , , , , ,	Employer's name	Self			s <del></del>	
	Employer's address	1385 Glencoe Number Street	Avenue		Number Street	3
	ts				2-	
To the state of th		8	- teat		3	# 450
The second secon		Pittsburgh	PA	15205	1	
		City	State ZIP	Code	City	State ZIP Code
	How long employed the	re? na			na	
Part 2: Give Details	About Monthly Income					
spouse unless you are se				50 80		
	pouse have more than one employe space, attach a separate sheet to the		mation for a	ll employers f	or that person on the line	es
			For	Debtor 1	For Debtor 2 or non-filing spouse	
	ges, salary, and commissions (be monthly, calculate what the monthly		2. \$	3,500.00	\$	
3. Estimate and list mont	hly overtime pay.		3. +\$		+ \$	
4. Calculate gross incom	e. Add line 2 + line 3.		4. \$	3,500.00	\$	

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Jeremy Fisher Case number (if known) 17-24756-JLT Debtor 1 First Name Last Name For Debtor 1 For Debtor 2 or non-filing spouse Copy line 4 here..... 3,500.00 5. List all payroll deductions: 5a. Tax, Medicare, and Social Security deductions 5a. 5b. Mandatory contributions for retirement plans 5b. 5c. Voluntary contributions for retirement plans 5c. 5d. Required repayments of retirement fund loans 5d. 5e. Insurance 5e. 5f. Domestic support obligations 5f. 5g. Union dues 5a 5h. Other deductions. Specify: 6. Add the payroll deductions. Add lines 5a + 5b + 5c + 5d + 5e +5f + 5g + 5h. 3,500.00 7. Calculate total monthly take-home pay. Subtract line 6 from line 4. 8. List all other income regularly received: 8a. Net income from rental property and from operating a business, profession, or farm Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total monthly net income. 8a 8b. Interest and dividends 8b. 8c. Family support payments that you, a non-filing spouse, or a dependent regularly receive Include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement. 8c. 8d. Unemployment compensation 8d. 8e. Social Security 8f. Other government assistance that you regularly receive Include cash assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies. Specify: 8f 8g. Pension or retirement income 8g. 8h. Other monthly income. Specify: 8h. 9. Add all other income. Add lines 8a + 8b + 8c + 8d + 8e + 8f +8g + 8h. 10. Calculate monthly income. Add line 7 + line 9. Add the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse. 11. State all other regular contributions to the expenses that you list in Schedule J. Include contributions from an unmarried partner, members of your household, your dependents, your roommates, and other friends or relatives. Do not include any amounts already included in lines 2-10 or amounts that are not available to pay expenses listed in Schedule J. 12. Add the amount in the last column of line 10 to the amount in line 11. The result is the combined monthly income. 3,500.00 Write that amount on the Summary of Your Assets and Liabilities and Certain Statistical Information, if it applies 12. Combined monthly income 13. Do you expect an increase or decrease within the year after you file this form? No.

Yes. Explain:

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Fill in the late of the state of	CW SU SU		
Fill in this information to identify your case:			
Debtor 1 Jeremy Fisher First Name Middle Name Last Name	Check if this is:		
Debtor 2 (Spouse, if filing) First Name Middle Name Last Name	An amended	d filing	
United States Bankruptcy Court for the: Western District of Pennsylvania			petition chapter 13
Case number 17-24756-GLT		s of the following	date:
(If known)	MM / DD / YY	YY	
Official Form 106J			
Schedule J: Your Expenses			12/15
Be as complete and accurate as possible. If two married people are filing information. If more space is needed, attach another sheet to this form. (if known). Answer every question.			
Part 1: Describe Your Household			
1. Is this a joint case?			
<ul><li>✓ No. Go to line 2.</li><li>✓ Yes. Does Debtor 2 live in a separate household?</li></ul>			
□ No			
☐ Yes. Debtor 2 must file Official Form 106J-2, Expenses for Se	parate Household of Debtor 2.		
2. Do you have dependents?	Dependent's relationship to	Dependent's	Does dependent live
Do not list Debtor 1 and Debtor 2. Yes. Fill out this information for each dependent	Debtor 1 or Debtor 2	age	with you?
Do not state the dependents' names.	daughter	_5	☑ No ☐ Yes
names.			□ No
	a	·	Yes
			☐ No☐ Yes
			□ No
	9		☐ Yes
			□ No □ Yes
3. Do your expenses include expenses of people other than yourself and your dependents?			
Part 2: Estimate Your Ongoing Monthly Expenses			
Estimate your expenses as of your bankruptcy filing date unless you are	e using this form as a supplement	in a Chapter 13 c	ase to report
expenses as of a date after the bankruptcy is filed. If this is a supplement applicable date.			
Include expenses paid for with non-cash government assistance if you	know the value of		
such assistance and have included it on Schedule I: Your Income (Office		Your expe	nses
<ol> <li>The rental or home ownership expenses for your residence. Include fi any rent for the ground or lot.</li> </ol>	irst mortgage payments and 4	\$	2,000.00
If not included in line 4:			
4a. Real estate taxes			
4b. Property, homeowner's, or renter's insurance	4	Vi	
4c. Home maintenance, repair, and upkeep expenses	4		
4d. Homeowner's association or condominium dues	4	u. Þ	

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Debtor 1 Jeremy Fisher Case number (if known) 17-24756-GLT

			Your expenses
5. <b>Ad</b>	ditional mortgage payments for your residence, such as home equity loans	5.	\$
6. <b>Ut</b>	ilities:		
6a	500000	6a.	\$ 500.00
6b		6b.	\$
6c.		6c.	\$510.00
6d		6d.	\$\$
7. <b>Fo</b>	od and housekeeping supplies	7.	\$ 1,000.00
8. <b>Ch</b>	ildcare and children's education costs	8.	\$
9. <b>Cl</b>	othing, laundry, and dry cleaning	9.	\$
10. <b>Pe</b>	rsonal care products and services	10.	\$
11. <b>M</b> e	edical and dental expenses	11.	\$
	ansportation. Include gas, maintenance, bus or train fare.		\$
	not include car payments.	12.	
	tertainment, clubs, recreation, newspapers, magazines, and books	13.	\$
14. Ch	aritable contributions and religious donations	14.	\$
	surance.  not include insurance deducted from your pay or included in lines 4 or 20.		
158	a. Life insurance	15a.	\$
15t	b. Health insurance	15b.	\$260.00
150	c. Vehicle insurance	15c.	\$ 265.00
150	d. Other insurance. Specify:	15d.	\$
	xes. Do not include taxes deducted from your pay or included in lines 4 or 20. ecify:	16.	\$
	stallment or lease payments:		
	a. Car payments for Vehicle 1	17a.	\$ 250.00
	b. Car payments for Vehicle 2	17b.	\$
	c. Other. Specify:	17c.	\$
	d. Other. Specify:	17d.	\$
18 Vo			
yo	ur payments of alimony, maintenance, and support that you did not report as deducted from ur pay on line 5, <i>Schedule I, Your Income</i> (Official Form 106I).	18.	\$350.00
19. <b>Otl</b>	ner payments you make to support others who do not live with you.		
Spe	ecify:	19.	\$
20. <b>Otl</b>	ner real property expenses not included in lines 4 or 5 of this form or on Schedule I: Your Inc	ome.	
208	Mortgages on other property	20a.	\$
20b	o. Real estate taxes	20b.	\$
200	2. Property, homeowner's, or renter's insurance	20c.	\$
200	Maintenance, repair, and upkeep expenses	20d.	\$
20€	Homeowner's association or condominium dues	20e.	\$

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	First Name Middle Name Last Name			
Other	Specify:	21.	+\$	
Calcu	late your monthly expenses.		Distribution	
22a. A	Add lines 4 through 21.	22a.	\$	5,135.00
22b. C	Copy line 22 (monthly expenses for Debtor 2), if any, from Official Form 106J-2	22b.	\$	
22c. A	add line 22a and 22b. The result is your monthly expenses.	22c.	\$	5,135.00
3. Calcula	ate your monthly net income.			3,500.00
23a. (	Copy line 12 (your combined monthly income) from Schedule I.	23a.	\$	0,000.00
23b. (	Copy your monthly expenses from line 22c above.	23b.	-\$	5,135.00
	Subtract your monthly expenses from your monthly income. The result is your monthly net income.	23c.	\$	-1,635.00
For exa	u expect an increase or decrease in your expenses within the year after you file this ample, do you expect to finish paying for your car loan within the year or do you expect you ge payment to increase or decrease because of a modification to the terms of your mortga	ur		
M No.		ige:		
☐ Yes				

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Fill in this in	formation to ident	ify your case:		100	
Debtor 1	Jeremy Fisher				36
· STATES CONTROL .	First Name	Middle Name	Last Name		
Debtor 2				1	
(Spouse, if filing)	First Name	Middle Name	Last Name		
United States I		he: Western District of F	ennsylvania	8	
(II KIIOWII)					Check if this is

### Official Form 106Dec

### **Declaration About an Individual Debtor's Schedules**

12/15

If two married people are filing together, both are equally responsible for supplying correct information.

You must file this form whenever you file bankruptcy schedules or amended schedules. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

l No	
Yes. Name of person	. Attach Bankruptcy Petition Preparer's Notice, Declaration, and
	Signature (Official Form 119).
ider penalty of perjury. I declare that	t I have read the summary and schedules filed with this declaration and
at they are true and correct.	
at they are true and correct.	
at they are true and correct.	
at they are true and correct.  /s/ Jeremy Fisher	*

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Fill in this in	formation to ide	entify your case:		ž.	
Debtor 1	Jeremy Fishe	er			
	First Name	Middle Name	Last Name	-	
Debtor 2					
(Spouse, if filing)	First Name	Middle Name	Last Name	<b>-</b>	
United States E	Bankruptcy Court fo	r the: Western District of F	Pennsylvania		
Case number (If known)	17-24756-G	LT			
		(d)			Check if this is an amended filing

#### Official Form 107

### Statement of Financial Affairs for Individuals Filing for Bankruptcy

04/16

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

Part	Give Details Abou	ut Your	Marital Sta	tus and Where Y	ou Lived Before							
1. W	/hat is your current marita	l status?	,									
	☐ Married ☑ Not married											
	2. During the last 3 years, have you lived anywhere other than where you live now?											
	□ No ☑ Yes. List all of the places you lived in the last 3 years. Do not include where you live now.											
Debtor 1:				Dates Debtor 1 lived there	Debtor 2:	Dates Debtor 2 lived there						
					☐ Same as Debtor 1	Same as Debtor 1						
284 Hilltop Drive				From		From						
	Number Street	Number Street		То	Number Street	То						
	Cheswick	PA	15024									
	City	State	ZIP Code	-	City State ZIP Code							
					☐ Same as Debtor 1	☐ Same as Debtor 1						
1349 Barr Avenue				From	No. 1	From						
	Number Street			То	Number Street	То						
	Pittsburgh	PA	15226									
	City	State	ZIP Code	-	City State ZIP Code							
Si	Ithin the last 8 years, did lates and territories include of No  Yes. Make sure you fill out	Arizona,	California, Idal	no, Louisiana, Nevad	walent in a community property state or territory? da, New Mexico, Puerto Rico, Texas, Washington, and m 106H).	(Community property d Wisconsin.)						

Part 2: Explain the Sources of Your Income

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Did you have any income from employmen Fill in the total amount of income you received If you are filing a joint case and you have inco No Yes. Fill in the details.	d from all jobs and all bus	inesses, including part-tir	me activities.	endar years?
	Debtor 1		Debtor 2	
	Sources of income Check all that apply.	Gross income (before deductions and exclusions)	Sources of income Check all that apply.	Gross income (before deductions and exclusions)
From January 1 of current year until the date you filed for bankruptcy:	<ul><li>☐ Wages, commissions, bonuses, tips</li><li>☑ Operating a business</li></ul>	\$42,000.00	<ul><li>Wages, commissions, bonuses, tips</li><li>Operating a business</li></ul>	\$
For last calendar year: (January 1 to December 31, 2016)	☐ Wages, commissions, bonuses, tips ☐ Operating a business	\$42,000.00	☐ Wages, commissions, bonuses, tips ☐ Operating a business	\$
For the calendar year before that: (January 1 to December 31, 2015 YYYY	<ul><li>☐ Wages, commissions, bonuses, tips</li><li>☑ Operating a business</li></ul>	\$42,000.00	☐ Wages, commissions, bonuses, tips☐ Operating a business	\$
Include income regardless of whether that inc unemployment, and other public benefit paym gambling and lottery winnings. If you are filing	ome is taxable. Example nents; pensions; rental inc a joint case and you have	s of other income are alin come; interest; dividends; re income that you receiv	money collected from laws ed together, list it only once	suits; royalties; and
Include income regardless of whether that inc unemployment, and other public benefit paym gambling and lottery winnings. If you are filing List each source and the gross income from e	ome is taxable. Example nents; pensions; rental inc a joint case and you have	s of other income are alin come; interest; dividends; re income that you receiv	money collected from laws ed together, list it only once	suits; royalties; and
nclude income regardless of whether that inc unemployment, and other public benefit paym gambling and lottery winnings. If you are filing List each source and the gross income from e	ome is taxable. Example lents; pensions; rental inc a a joint case and you have each source separately. D	s of other income are alin come; interest; dividends; re income that you receiv	money collected from laws ed together, list it only once t you listed in line 4.	suits; royalties; and e under Debtor 1.  Gross income from each source
nclude income regardless of whether that incomendate income regardless of whether that incomendate incoment, and other public benefit paymers are filling and lottery winnings. If you are filling and is each source and the gross income from each of the work o	ome is taxable. Examplements; pensions; rental including a joint case and you have each source separately. Debtor 1  Sources of income	s of other income are alin come; interest; dividends; re income that you receiv to not include income that Gross income from each source (before deductions and	money collected from laws ed together, list it only once t you listed in line 4.  Debtor 2  Sources of income	suits; royalties; and e under Debtor 1.  Gross income from each source (before deductions and
nclude income regardless of whether that inc unemployment, and other public benefit paym gambling and lottery winnings. If you are filing List each source and the gross income from e	ome is taxable. Examplements; pensions; rental including a joint case and you have each source separately. Debtor 1  Sources of income	s of other income are alin come; interest; dividends; re income that you receiv to not include income that Gross income from each source (before deductions and	money collected from laws ed together, list it only once t you listed in line 4.  Debtor 2  Sources of income	suits; royalties; and e under Debtor 1.  Gross income from each source (before deductions and
nclude income regardless of whether that incuremployment, and other public benefit paym gambling and lottery winnings. If you are filing sit each source and the gross income from each No Yes. Fill in the details.	ome is taxable. Examplements; pensions; rental including a joint case and you have each source separately. Debtor 1  Sources of income	s of other income are alin come; interest; dividends; re income that you receiv to not include income that Gross income from each source (before deductions and	money collected from laws ed together, list it only once t you listed in line 4.  Debtor 2  Sources of income	suits; royalties; and e under Debtor 1.  Gross income from each source (before deductions and
Include income regardless of whether that incurrently include income regardless of whether that incurrently include income regardless of whether that incurrently includes a substitution of the problem of the problem includes a substitution of the problem. If you are filing and lottery winnings. If you are filing are filing includes a substitution of the problem of the problem includes a substitution of the problem. If you are filing are filing and the problem includes a substitution of the problem includes a substitutio	ome is taxable. Examplements; pensions; rental including a joint case and you have each source separately. Debtor 1  Sources of income	s of other income are alin come; interest; dividends; re income that you receiv to not include income that Gross income from each source (before deductions and	money collected from laws ed together, list it only once t you listed in line 4.  Debtor 2  Sources of income	suits; royalties; and e under Debtor 1.  Gross income from each source (before deductions and
Include income regardless of whether that incurrently include income regardless of whether that incurrently included income regardless of whether that incurrently included in paymagambling and lottery winnings. If you are filing List each source and the gross income from each No Yes. Fill in the details.  From January 1 of current year until the date you filed for bankruptcy:  For last calendar year:	ome is taxable. Examplements; pensions; rental including a joint case and you have each source separately. Debtor 1  Sources of income	s of other income are alin tome; interest; dividends; the income that you receive no not include income that  Gross income from each source (before deductions and exclusions)  \$	money collected from laws ed together, list it only once t you listed in line 4.  Debtor 2  Sources of income	suits; royalties; and e under Debtor 1.  Gross income from each source (before deductions and
Include income regardless of whether that incurrently include income regardless of whether that incurrently include income regardless of whether that incurrently includes a substitution of the problem of the problem includes a substitution of the problem. If you are filing and lottery winnings. If you are filing are filing includes a substitution of the problem of the problem includes a substitution of the problem. If you are filing are filing and the problem includes a substitution of the problem includes a substitutio	ome is taxable. Examplements; pensions; rental including a joint case and you have each source separately. Debtor 1  Sources of income	s of other income are alin tome; interest; dividends; the income that you receive no not include income that  Gross income from each source (before deductions and exclusions)  \$	money collected from laws ed together, list it only once t you listed in line 4.  Debtor 2  Sources of income Describe below.	suits; royalties; and e under Debtor 1.  Gross income from each source (before deductions and
Include income regardless of whether that incumemployment, and other public benefit paying gambling and lottery winnings. If you are filing List each source and the gross income from e No Yes. Fill in the details.  From January 1 of current year until the date you filed for bankruptcy:  For last calendar year:  (January 1 to December 31, 2016	ome is taxable. Examplements; pensions; rental including a joint case and you have each source separately. Debtor 1  Sources of income	Gross income from each source (before deductions)  \$	money collected from laws ed together, list it only once t you listed in line 4.  Debtor 2  Sources of income Describe below.	suits; royalties; and e under Debtor 1.  Gross income from each source (before deductions and
From January 1 of current year until the date you filed for bankruptcy:  For last calendar year: (January 1 to December 31,2016	ome is taxable. Examplements; pensions; rental including a joint case and you have each source separately. Debtor 1  Sources of income	Gross income from each source (before deductions)  \$\sum_{\text{s}}	money collected from laws ed together, list it only once t you listed in line 4.  Debtor 2  Sources of income Describe below.	Gross income from each source (before deductions and exclusions)  - \$

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Case number (if known) 17-24756-GLT Part 3: List Certain Payments You Made Before You Filed for Bankruptcy 6. Are either Debtor 1's or Debtor 2's debts primarily consumer debts? No. Neither Debtor 1 nor Debtor 2 has primarily consumer debts. Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose." During the 90 days before you filed for bankruptcy, did you pay any creditor a total of \$6,425\* or more? Mo. Go to line 7. Yes. List below each creditor to whom you paid a total of \$6,425\* or more in one or more payments and the total amount you paid that creditor. Do not include payments for domestic support obligations, such as child support and alimony. Also, do not include payments to an attorney for this bankruptcy case. \* Subject to adjustment on 4/01/19 and every 3 years after that for cases filed on or after the date of adjustment. Yes. Debtor 1 or Debtor 2 or both have primarily consumer debts. During the 90 days before you filed for bankruptcy, did you pay any creditor a total of \$600 or more? No. Go to line 7. Yes. List below each creditor to whom you paid a total of \$600 or more and the total amount you paid that creditor. Do not include payments for domestic support obligations, such as child support and alimony. Also, do not include payments to an attorney for this bankruptcy case. Dates of Amount you still owe Was this payment for... Total amount paid payment ■ Mortgage Creditor's Name ☐ Car Credit card Number Street Loan repayment Suppliers or vendors Other State ZIP Code ■ Mortgage Creditor's Name Car ☐ Credit card Number Street ☐ Loan repayment Suppliers or vendors Other State ZIP Code ■ Mortgage Creditor's Name ☐ Car ☐ Credit card Number Street Loan repayment Suppliers or vendors Other\_ State ZIP Code

Jeremy Fisher

Debtor 1

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Case number (if known) 17-24756-GLT

siders include your relator rporations of which yo	u are an officer, director, per a business you operate as a	relatives of any son in control, o	general partners; p r owner of 20% or i	artnerships of whic more of their voting	who was an insider?  In you are a general partner;  securities; and any managing  r domestic support obligations,
No Yes. List all payment	s to an insider.				
		Dates of payment	Total amount paid	Amount you still owe	Reason for this payment
Insider's Name			\$	\$	
Number Street					
9					
City	State ZIP Code	-			
Insider's Name			\$	\$	
Number Street					
Number Street					
City	State ZIP Code	vou make any p	payments or trans	fer any property o	n account of a debt that benefited
City  ithin 1 year before yo i insider?  clude payments on del			payments or trans Total amount paid	fer any property o Amount you still owe	n account of a debt that benefited  Reason for this payment  Include creditor's name
City  ithin 1 year before yo i insider?  clude payments on del	u filed for bankruptcy, did	by an insider.  Dates of	Total amount	Amount you still	Reason for this payment
City  Ithin 1 year before yo I insider?  Clude payments on del  No I Yes. List all payment	u filed for bankruptcy, did	by an insider.  Dates of	Total amount paid	Amount you still owe	Reason for this payment
City  Ithin 1 year before you insider? Clude payments on del  No  Yes. List all payment  Insider's Name	u filed for bankruptcy, did ots guaranteed or cosigned s that benefited an insider.	by an insider.  Dates of	Total amount paid	Amount you still owe	Reason for this payment
City  Ithin 1 year before you insider?  Clude payments on del  No  I Yes. List all payment	u filed for bankruptcy, did	by an insider.  Dates of	Total amount paid	Amount you still owe	Reason for this payment
City  Ithin 1 year before you insider? Clude payments on del  No  Yes. List all payment  Insider's Name	u filed for bankruptcy, did ots guaranteed or cosigned s that benefited an insider.	by an insider.  Dates of	Total amount paid	Amount you still owe	Reason for this payment

Jeremy Fisher

Debtor 1

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First Name Middle Name Las	t Name	Case number (if knot	<sub>wn)</sub> 17-24756-GLT	
: Identify Legal Actions, Repos	sessions, and Foreclos	ures		
in 1 year before you filed for bankrup all such matters, including personal injur- contract disputes.				
No				
es. Fill in the details.		**		
	Nature of the case	Court or agency		Status of the case
Case title Joanna Waldsmith vs.	civil lawsuit	Allegheny Count	y CCP	- 🗹 Pending
	-	Court Name		On appeal
Jeremy Fisher		414 Grant Street	Ţ,	Concluded
Case number AR-16-003398	_	Pittsburgh	PA 15219	-
Case title Steven Sutton and Edit	civil lawsuit	Butler County C	СР	- Pending
Sutton vs. Jeremy Fisher		300 South Main	Street	On appeal
notes and the second by	•	Number Street	Olloot	Concluded
Case number 17-10065	_	Butler City Si	PA 16003 tate ZIP Code	-
tin 1 year before you filed for bankrup ck all that apply and fill in the details belo No. Go to line 11.		rty repossessed, foreclosed,	garnished, attached,	seized, or levied?
ck all that apply and fill in the details belo			garnished, attached, Date	
ck all that apply and fill in the details belo No. Go to line 11.	.wc			seized, or levied?  Value of the property
ck all that apply and fill in the details belo No. Go to line 11.	.wc			
ck all that apply and fill in the details below.  No. Go to line 11.  Yes. Fill in the information below.  Creditor's Name	Describe the pro	perty		Value of the property
ck all that apply and fill in the details below.  No. Go to line 11.  Yes. Fill in the information below.	Describe the pro	pperty		Value of the property
ck all that apply and fill in the details below.  No. Go to line 11.  Yes. Fill in the information below.  Creditor's Name	Describe the pro	pperty ppened as repossessed.		Value of the property
ck all that apply and fill in the details below.  No. Go to line 11.  Yes. Fill in the information below.  Creditor's Name	Explain what hap	pperty		Value of the property
ck all that apply and fill in the details below.  No. Go to line 11.  Yes. Fill in the information below.  Creditor's Name	Explain what hap Property w Property w Property w	pperty  ppened  as repossessed. as foreclosed.		Value of the property
ck all that apply and fill in the details below.  No. Go to line 11.  Yes. Fill in the information below.  Creditor's Name  Number Street	Explain what hap Property w Property w Property w	operty  ppened  as repossessed. as foreclosed. as garnished. as attached, seized, or levied.		Value of the property
ck all that apply and fill in the details below.  No. Go to line 11.  Yes. Fill in the information below.  Creditor's Name  Number Street	Explain what hap Property w Property w Property w Property w Property w	operty  ppened  as repossessed. as foreclosed. as garnished. as attached, seized, or levied.	Date	Value of the property
ck all that apply and fill in the details below.  No. Go to line 11.  Yes. Fill in the information below.  Creditor's Name  Number Street	Explain what hap Property w Property w Property w Property w Property w	operty  ppened  as repossessed. as foreclosed. as garnished. as attached, seized, or levied.	Date	Value of the property
Creditor's Name  Creditor's Name  City State ZIP (  Creditor's Name	Explain what hap Property w Property w Property w Property w Property w	operty  ppened  as repossessed. as foreclosed. as garnished. as attached, seized, or levied.	Date	Value of the property
ck all that apply and fill in the details below.  No. Go to line 11.  Yes. Fill in the information below.  Creditor's Name  Number Street  City State ZIP 0	Explain what hap Property w Property w Property w Property w Property w	ppened as repossessed. as foreclosed. as garnished. as attached, seized, or levied.	Date	Value of the property
Creditor's Name  Creditor's Name  City State ZIP (  Creditor's Name	Explain what hap Property w Property w Property w Property w Property w Explain what hap	ppened as repossessed. as foreclosed. as garnished. as attached, seized, or levied.	Date	Value of the property
Creditor's Name  Creditor's Name  City State ZIP (  Creditor's Name	Explain what hap Property w	ppened as repossessed. as foreclosed. as garnished. as attached, seized, or levied. apperty	Date	Value of the property

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First Name Middle Name Last N	Name Case Humb	er (if known) 17-24756-GLT
nin 90 days before you filed for bankru	ptcy, did any creditor, including a bank or financia	I institution, set off any amounts from you
ounts or refuse to make a payment bec	ause you owed a debt?	mountain, out on any amounts nom, yo
No		
Yes. Fill in the details.		
	B	D. 1
	Describe the action the creditor took	Date action Amount was taken
Creditor's Name		
		\$
Number Street		
City State ZIP Code	Last 4 digits of account number: XXXX	
nin 1 year before you filed for bankrupt	cy, was any of your property in the possession of	an assignee for the benefit of
litors, a court-appointed receiver, a cus		an accignos for the senent of
No .	No. of the contract of the con	
Yes		
_		
List Certain Gifts and Contribu	tions	
in 2 years before you filed for bankrup	tcy, did you give any gifts with a total value of mo	re than \$600 per person?
	tcy, did you give any gifts with a total value of mo	re than \$600 per person?
No	tcy, did you give any gifts with a total value of mo	re than \$600 per person?
No	tcy, did you give any gifts with a total value of mo	re than \$600 per person?
No	tcy, did you give any gifts with a total value of mo  Describe the gifts	Dates you gave Value
No Yes. Fill in the details for each gift.		
No Yes. Fill in the details for each gift.  Gifts with a total value of more than \$600		Dates you gave Value
No Yes. Fill in the details for each gift.  Gifts with a total value of more than \$600 per person		Dates you gave Value
No Yes. Fill in the details for each gift.  Gifts with a total value of more than \$600		Dates you gave Value the gifts
No Yes. Fill in the details for each gift.  Gifts with a total value of more than \$600 per person		Dates you gave Value the gifts
No Yes. Fill in the details for each gift.  Gifts with a total value of more than \$600 per person		Dates you gave Value the gifts
No Yes. Fill in the details for each gift.  Gifts with a total value of more than \$600 per person		Dates you gave Value the gifts
Yes. Fill in the details for each gift.  Gifts with a total value of more than \$600 per person  Person to Whom You Gave the Gift		Dates you gave Value the gifts
Yes. Fill in the details for each gift.  Gifts with a total value of more than \$600 per person  Person to Whom You Gave the Gift		Dates you gave Value the gifts
Yes. Fill in the details for each gift.  Gifts with a total value of more than \$600 per person  Person to Whom You Gave the Gift		Dates you gave Value the gifts
Yes. Fill in the details for each gift.  Gifts with a total value of more than \$600 per person  Person to Whom You Gave the Gift  Jumber Street		Dates you gave Value the gifts
No Yes. Fill in the details for each gift.  Gifts with a total value of more than \$600 per person  Person to Whom You Gave the Gift  Street  City State ZIP Code  Person's relationship to you	Describe the gifts	Dates you gave the gifts  S  \$
No Yes. Fill in the details for each gift.  Gifts with a total value of more than \$600 per person  Person to Whom You Gave the Gift  Gity State ZIP Code  Person's relationship to you  Gifts with a total value of more than \$600		Dates you gave the gifts  S  S  Dates you gave Value
No Yes. Fill in the details for each gift.  Gifts with a total value of more than \$600 per person  Person to Whom You Gave the Gift  Gity State ZIP Code  Person's relationship to you  Gifts with a total value of more than \$600	Describe the gifts	Dates you gave the gifts  S  \$
No Yes. Fill in the details for each gift.  Gifts with a total value of more than \$600 per person  Person to Whom You Gave the Gift  Gity State ZIP Code  Person's relationship to you  Gifts with a total value of more than \$600	Describe the gifts	Dates you gave the gifts  S  S  Dates you gave the gifts  Value
Ces. Fill in the details for each gift.  Gifts with a total value of more than \$600 per person  Person to Whom You Gave the Gift  State ZIP Code  Person's relationship to you  Gifts with a total value of more than \$600 per person	Describe the gifts	Dates you gave the gifts  S  S  Dates you gave Value
Ces. Fill in the details for each gift.  Gifts with a total value of more than \$600 per person  Person to Whom You Gave the Gift  State ZIP Code  Person's relationship to you  Gifts with a total value of more than \$600 per person	Describe the gifts	Dates you gave the gifts  S  S  Dates you gave the gifts  Value
Ces. Fill in the details for each gift.  Gifts with a total value of more than \$600 per person  Person to Whom You Gave the Gift  State ZIP Code  Person's relationship to you  Gifts with a total value of more than \$600 per person	Describe the gifts	Dates you gave the gifts  S  S  Dates you gave the gifts  Value
Yes. Fill in the details for each gift.  Gifts with a total value of more than \$600 per person  Person to Whom You Gave the Gift  Dity State ZIP Code  Person's relationship to you  Gifts with a total value of more than \$600 per person	Describe the gifts	Dates you gave the gifts  S  S  Dates you gave the gifts  Value
Yes. Fill in the details for each gift.  Gifts with a total value of more than \$600 per person  Person to Whom You Gave the Gift  State ZIP Code  Person's relationship to you  Gifts with a total value of more than \$600 per person  Person to Whom You Gave the Gift	Describe the gifts	Dates you gave the gifts  S  S  Dates you gave the gifts  Value
Ces. Fill in the details for each gift.  Gifts with a total value of more than \$600 per person  Person to Whom You Gave the Gift  State ZIP Code  Person's relationship to you  Gifts with a total value of more than \$600 per person	Describe the gifts	Dates you gave the gifts  S  S  Dates you gave the gifts  Value
Ces. Fill in the details for each gift.  Gifts with a total value of more than \$600 per person  Person to Whom You Gave the Gift  State ZIP Code  Person's relationship to you  Gifts with a total value of more than \$600 per person  Person to Whom You Gave the Gift  Sumber Street	Describe the gifts	Dates you gave the gifts  S  S  Dates you gave the gifts  Value
Ves. Fill in the details for each gift.  Gifts with a total value of more than \$600 per person  Person to Whom You Gave the Gift  State ZIP Code  Person's relationship to you  Sifts with a total value of more than \$600 per person  Person to Whom You Gave the Gift	Describe the gifts	Dates you gave the gifts  S  S  Dates you gave the gifts  Value
Ces. Fill in the details for each gift.  Gifts with a total value of more than \$600 per person  Person to Whom You Gave the Gift  State ZIP Code  Person's relationship to you  Gifts with a total value of more than \$600 per person  Person to Whom You Gave the Gift  Sumber Street	Describe the gifts	Dates you gave the gifts  S  S  Dates you gave the gifts  Value

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1	Jeremy Fisher	Case number (if known	17-24756-GLT	
	First Name Middle Name La	st Name		
/ithi	in 2 years before you filed for bankru	uptcy, did you give any gifts or contributions with a total va	lue of more than \$6	00 to any charity?
Ź N		proy, and you give any gine or contributions with a total va	ide of more than 40	oo to any chanty.
	no 'es. Fill in the details for each gift or con	otribution		
•	es. I ill ill the details for each gift or cor	nuibalion.		
	Gifts or contributions to charities that total more than \$600	Describe what you contributed	Date you contributed	Value
		)		
-	harity's Name	_		\$
C	manty's Name			
-		-		\$
N	umber Street	-		
C	ity State ZIP Code	=		
-	21. 0000	THE STATE OF THE S	-	
6:	List Certain Losses			
	Describe the property you lost and how the loss occurred	Describe any insurance coverage for the loss  Include the amount that insurance has paid. List pending insurance claims on line 33 of Schedule A/B: Property.	Date of your loss	Value of property lost
-				
			0	\$
		She take an annual sellow		
7:	List Certain Payments or Trai	nsfers		
/ith	in 1 year before you filed for bankrup	otcy, did you or anyone else acting on your behalf pay or tr	ansfer any property	to anyone
		or preparing a bankruptcy petition?		
		reparers, or credit counseling agencies for services required in	your bankruptcy.	
IN				
Y	es. Fill in the details.			
	Daniel We Daid	Description and value of any property transferred	Date payment or transfer was made	Amount of paymen
	Person Who Was Paid			
	Number Street		<del></del>	\$
-				\$
				23
	City State ZIP Code			
	Email or website address			
	Person Who Made the Payment, if Not You			

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	Description and value of any property t	ransferred	Date payment or transfer was made	Amount of payment
Person Who Was Paid				
Number Street			-	\$
Number Street				\$
City State ZIP Code				
Email or website address				
Person Who Made the Payment, if Not You				
Yes. Fill in the details.	Description and value of any property t	ransferred	Date payment or transfer was	Amount of paym
	Description and value of any property t	ransierred		Amount of paym
Person Who Was Paid				
				•
Number Street				\$
Number Street				\$ \$
City State ZIP Code		transfer any prope	rty to anyone, other tha	\$s
City State ZIP Code  State ZIP	business or financial affairs? made as security (such as the granting of	f a security interest	or mortgage on your pro	perty).
City State ZIP Code  ithin 2 years before you filed for bankrul ansferred in the ordinary course of your clude both outright transfers and transfers ro onot include gifts and transfers that you ha	business or financial affairs? made as security (such as the granting of the already listed on this statement.  Description and value of property	of a security interest  Describe any prop	or mortgage on your pro	perty).  Date transfer
City State ZIP Code  ithin 2 years before you filed for bankrup ansferred in the ordinary course of your clude both outright transfers and transfers r o not include gifts and transfers that you ha No Yes. Fill in the details.	business or financial affairs? made as security (such as the granting of the already listed on this statement.  Description and value of property	of a security interest  Describe any prop	or mortgage on your pro	perty).  Date transfer
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## Case 17-24756-GLT Doc 17 Filed 12/21/17 Entered 12/21/17 21:05:14 Desc Main Document Page 44 of 68

Name of trust	ebtor 1	Jeremy First Name		ast Name	Cas	se number (if kno	17-24756-GLT		
are a beneficiary? (These are often called asset-protection devices.)    No   Yes. Fill in the details.									
Description and value of the property transferred    Date transwas made					rty to a sel	f-settled trus	t or similar device of v	vhich yo	u
Date framewas made  Name of trust    Name of trust   Description and value of the property transferred   Date framewas made was made			? (These are often called	asset-protection devices.)					
Name of trust    Description and value of the property transferred   Date transvas made			1						
Name of trust	_	Yes. Fill in the	details.						
Within 1 year before you filed for bankruptcy, were any financial accounts or instruments held in your name, or for your benefit, closed, sold, moved, or transferred?  Include checking, savings, money market, or other financial accounts; certificates of deposit; shares in banks, credit unions, brokerage houses, pension funds, cooperatives, associations, and other financial institutions.    No				Description and value of the prope	erty transfer	red			e transfer s made
Within 1 year before you filed for bankruptcy, were any financial accounts or instruments held in your name, or for your benefit, closed, sold, moved, or transferred?  Include checking, savings, money market, or other financial accounts; certificates of deposit; shares in banks, credit unions, brokerage houses, pension funds, cooperatives, associations, and other financial institutions.    No									
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Within 1 year before you filed for bankruptcy, were any financial accounts or instruments held in your name, or for your benefit, closed, sold, moved, or transferred?  Include checking, savings, money market, or other financial accounts; certificates of deposit; shares in banks, credit unions, brokerage houses, pension funds, cooperatives, associations, and other financial institutions.  No Yes. Fill in the details.  Last 4 digits of account number Type of account or instrument closed, sold, moved, or transferred  XXXX									
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Within 1 year before you filed for bankruptcy, were any financial accounts or instruments held in your name, or for your benefit, closed, sold, moved, or transferred?  Include checking, savings, money market, or other financial accounts; certificates of deposit; shares in banks, credit unions, brokerage houses, pension funds, cooperatives, associations, and other financial institutions.  No Yes. Fill in the details.  Last 4 digits of account number Type of account or instrument closed, sold, moved, or transferred  XXXX									
closed, sold, moved, or transferred? Include checking, savings, money market, or other financial accounts; certificates of deposit; shares in banks, credit unions, brokerage houses, pension funds, cooperatives, associations, and other financial institutions.    And   Yes. Fill in the details.	irt 8	List Certa	ain Financial Accou	nts, Instruments, Safe Deposit	Boxes, a	and Storag	e Units		
Yes. Fill in the details.    Last 4 digits of account number   Type of account or instrument   Date account was closed, sold, moved, or transferred   Closing or transferred	Incl brol	ude checking kerage house	, savings, money marke				res in banks, credit un	nions,	
Last 4 digits of account number   Type of account or instrument   Date account was closed, sold, moved, or transferred   Closing or transferred   Savings   Savings			e details.						
Name of Financial Institution  XXXX Checking \$	_	5- <del>5-50</del> -5-5-5-5-5-5-5-6-6-6-6-6-6-6-6-6-6-6-6-		Last 4 divite of account months	Time of a	account or	Data account was	Lacth	alanco bofor
Number Street    Savings   Money market   Brokerage   Other				Last 4 digits of account number			closed, sold, moved,		
Money market   Brokerage   Other		Name of Financi	al Institution		☐ Chec	king	<u> </u>	\$	
Money market   Brokerage   Other		Number Street		_	☐ Savin	gs		v	
City State ZIP Code  XXXX Checking \$  Name of Financial Institution  Number Street  Do you now have, or did you have within 1 year before you filed for bankruptcy, any safe deposit box or other depository for securities, cash, or other valuables?  No Yes. Fill in the details.  Who else had access to it?  Describe the contents  Do you have within 1 year before you filed for bankruptcy, any safe deposit box or other depository for securities, cash, or other valuables?  No Yes. Fill in the details.					☐ Mone	y market			
City State ZIP Code  XXXX Checking \$  Name of Financial Institution  Number Street  Do you now have, or did you have within 1 year before you filed for bankruptcy, any safe deposit box or other depository for securities, cash, or other valuables?  No Yes. Fill in the details.  Who else had access to it?  Describe the contents  Do you have within 1 year before you filed for bankruptcy, any safe deposit box or other depository for securities, cash, or other valuables?  No Yes. Fill in the details.					☐ Broke	erage			
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□ Brokerage □ Other  Do you now have, or did you have within 1 year before you filed for bankruptcy, any safe deposit box or other depository for securities, cash, or other valuables? □ No □ Yes. Fill in the details.  Who else had access to it? □ Describe the contents □ Name □ Number Street □ Number Street □ City State ZIP Code		Name of Financi	al Institution		☐ Savin	gs			
□ Brokerage □ Other  Do you now have, or did you have within 1 year before you filed for bankruptcy, any safe deposit box or other depository for securities, cash, or other valuables? □ No □ Yes. Fill in the details.  Who else had access to it? □ Describe the contents □ Name □ Number Street □ Number Street □ City State ZIP Code		Number Street	t	_	☐ Mone	y market			
City State ZIP Code  Do you now have, or did you have within 1 year before you filed for bankruptcy, any safe deposit box or other depository for securities, cash, or other valuables?  No  Yes. Fill in the details.  Who else had access to it?  Describe the contents  Do you have  Name  Number Street  Number Street  City State ZIP Code					☐ Broke	erage			
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Ves. Fill in the details.  Who else had access to it?  Describe the contents  Name of Financial Institution  Name  Number Street  City State ZIP Code	seci	city you now have	State ZIP Code		☐ Broke	erage 	box or other depositor	y for	
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Name of Financial Institution  Name  Number Street  Number Street  City State ZIP Code		res. Fill in the	s uetalis.	Who also had assess to the		Docariba	e contents		Do you sti
Name of Financial Institution  Name  Number Street  Number Street  City State ZIP Code				wno else nad access to it?		Describe th	e contents		have it?
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1	Jeremy Fisher		Case number (if known) 17-24756-0	JLI
	First Name Middle Name Last	Name	,	
	and the second s	(d) 9727 A35 (g) (15075)		
ave yo 1 No	ou stored property in a storage unit	or place other than your home with	in 1 year before you filed for bankru	ptcy?
35 M. W. S. S. S.	s. Fill in the details			
1 108	s. Fill in the details.	What lead a 100	December 1	B
		Who else has or had access to it?	Describe the contents	Do you still have it?
N	ame of Storage Facility	Name		☐ No ☐ Yes
	or storage racinity	Nume		☐ Yes
N	umber Street	Number Street	<del></del>	
-		CityState ZIP Code	The same of the sa	
Ci	ity State ZIP Code		THE STATE OF THE S	
t 9:	Identify Property You Hold	or Control for Someone Else		
20.00				
	d in trust for someone.	omeone else owns? Include any pr	operty you borrowed from, are storii	ng for,
No.				
Ye	es. Fill in the details.			
		Where is the property?	Describe the property	Value
_	lumar's Nama		4	
ō	wner's Name			\$
	owner's Name	Number Street		\$
		Number Street		\$
			Cada	\$
N			Code	\$
N	lumber Street Sity State ZIP Code	City State ZIP	Code	\$
n G t 10:	ity State ZIP Code  Give Details About Environs	City State ZIP of mental Information	Code	\$
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t 10:	Give Details About Environs urpose of Part 10, the following definance on the commental law means any federal, sta	mental Information  nitions apply: te, or local statute or regulation cor	ncerning pollution, contamination, re face water, groundwater, or other m	
t 10:	Give Details About Environmental law means any federal, stadous or toxic substances, wastes, oling statutes or regulations controlling	mental Information  nitions apply: te, or local statute or regulation cor r material into the air, land, soil, sui ng the cleanup of these substances	ncerning pollution, contamination, re face water, groundwater, or other m i, wastes, or material.	edium,
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	Sher Middle Name	Last	Name	Case number	r (if known) 17-24756-GLT	
		2300	, talle			
1						
	ny governn	nental unit o	f any release of hazardous m	naterial?		
No						
Yes. Fill in the d	letails.					
			Governmental unit	Environmental la	w, if you know it	Date of notice
Name of site			Governmental unit			
Number Street			Number Street			
				9		
			City State ZIP Co	de		
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e you been a pa	rty in any ju	udicial or ad	ministrative proceeding und	er any environmental I	aw? Include settlements a	nd orders.
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Case number			City State 2	ZIP Code		
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Business Name   Number Street   Name of accountant or bookkeeper   Dates business existed	Jeremy Fisher First Name Middle Name	Last Name	Case number (IF known) 17-24756-GLT
Business Name    Runder Street   Name of accountant or bookkeeper   Dates business existed			
Number Street  Name of accountant or bookkeeper  Dates business existed  From		Describe the nature of the business	
Name of accountant or bookkeeper    Dates business existed	Business Name		EIN:
All thin 2 years before you filed for bankruptcy, did you give a financial statement to anyone about your business? Include all financial statitutions, creditors, or other parties.  No Date issued  Date issued  Name Number Street  City State ZIP Code  State ZIP Code  Name on this Statement of Financial Affairs and any attachments, and I declare under penalty of perjury that the answers are true and correct. I understand that making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both.  Signature of Debtor 1  Date 12/21/2017 Date 12/21/2019 No No No	Number Street	Name of accountant or bookkeeper	Dates business existed
All thin 2 years before you filed for bankruptcy, did you give a financial statement to anyone about your business? Include all financial statitutions, creditors, or other parties.    No			,
Date issued    Name	City State	ZIP Code	From 10
Date issued    Name			anyone about your business? Include all financial
Name  Name  Number Street  City State ZiP Code  Sign Below  I have read the answers on this Statement of Financial Affairs and any attachments, and I declare under penalty of perjury that the answers are true and correct. I understand that making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both.  It is Jeremy Fisher  Signature of Debtor 1  Date  Did you attach additional pages to Your Statement of Financial Affairs for Individuals Filing for Bankruptcy (Official Form 107)?  No Yes  Yes	Í No		
Number Street    Number Street	Yes. Fill in the details below.		
Number Street  City State ZIP Code  Sign Below  have read the answers on this Statement of Financial Affairs and any attachments, and I declare under penalty of perjury that the answers are true and correct. I understand that making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both.  Signature of Debtor 1  Date 12/21/2017  Date 12/21/2017  Date 12/21/2017  Date 12/21/2017  Date 12/21/2017  Date 13/2017  Date 14/2017  Date 15/2017  Date 16/2017  Date 16/2017  Date 17/2017  Date 18/2017  Date 18/		Date issued	
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Signature of Debtor 1  Date 12/21/2017  Date  Did you attach additional pages to Your Statement of Financial Affairs for Individuals Filing for Bankruptcy (Official Form 107)?  No Yes  Did you pay or agree to pay someone who is not an attorney to help you fill out bankruptcy forms?	answers are true and correct. I in connection with a bankrupto	understand that making a false statement, concealing tase can result in fines up to \$250,000, or imprison	ling property, or obtaining money or property by fraud
Date 12/21/2017 Date  Did you attach additional pages to Your Statement of Financial Affairs for Individuals Filing for Bankruptcy (Official Form 107)?  No Yes  Did you pay or agree to pay someone who is not an attorney to help you fill out bankruptcy forms?	🗶 /s/ Jeremy Fisher	×	
Did you attach additional pages to Your Statement of Financial Affairs for Individuals Filing for Bankruptcy (Official Form 107)?  No Yes  Did you pay or agree to pay someone who is not an attorney to help you fill out bankruptcy forms?	Signature of Debtor 1	Signature of Debtor 2	
No Yes  Did you pay or agree to pay someone who is not an attorney to help you fill out bankruptcy forms?  No	Date 12/21/2017	Date	
Yes  Did you pay or agree to pay someone who is not an attorney to help you fill out bankruptcy forms?  No	Did you attach additional pages	to Your Statement of Financial Affairs for Individu	als Filing for Bankruptcy (Official Form 107)?
<b>√</b> No			
		neone who is not an attorney to help you fill out ba	nkruptcy forms?
Declaration, and Signature (Official Form 119).			. Attach the Bankruptcy Petition Preparer's Notice,

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#### Addendum to Statement of Financial Affairs

Part 1, Question 2

Additional Address:

8575 Babcock Blvd. Pittsburgh, PA 15237

#### Part 4, Question 9

Additional Lawsuit:

Darrell Pratz and Christine Pratz v. Jeremy Fisher, individually and d/b/a Fisher Excavating, MT&R of Western Pennsylvania and Estate of James Stull NO. AD 2016-10272 Civil lawsuit

Status: Pending

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Debtor 1	Jeremy Fishe	r	
TO POSSESSE AS A SECOND	First Name	Middle Name	Last Name
Debtor 2			
(Spouse, if filing)	First Name	Middle Name	Last Name
United States I	Bankruptcy Court for	the: Western District of F	Pennsylvania

☐ Check if this is an amended filing

12/15

#### Official Form 108

#### Statement of Intention for Individuals Filing Under Chapter 7

If you are an individual filing under chapter 7, you must fill out this form if:

- creditors have claims secured by your property, or
- you have leased personal property and the lease has not expired.

You must file this form with the court within 30 days after you file your bankruptcy petition or by the date set for the meeting of creditors, whichever is earlier, unless the court extends the time for cause. You must also send copies to the creditors and lessors you list on the form.

If two married people are filing together in a joint case, both are equally responsible for supplying correct information. Both debtors must sign and date the form.

Be as complete and accurate as possible. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known).

#### Part 1: List Your Creditors Who Have Secured Claims

Identify the creditor and the property that is collateral	What do you intend to do with the property that secures a debt?	Did you claim the property as exempt on Schedule C?
Creditor's	☐ Surrender the property.	□ No
name:	Retain the property and redeem it.	☐ Yes
Description of property securing debt:	Retain the property and enter into a Reaffirmation Agreement.	
	Retain the property and [explain]:	
Creditor's	☐ Surrender the property.	□ No
name:	Retain the property and redeem it.	Yes
Description of property securing debt:	Retain the property and enter into a Reaffirmation Agreement.	
occurring debt.	Retain the property and [explain]:	
Creditor's	☐ Surrender the property.	□ No
name:	Retain the property and redeem it.	☐ Yes
Description of property securing debt:	Retain the property and enter into a Reaffirmation Agreement.	
occurring decot.	☐ Retain the property and [explain]:	
Creditor's	☐ Surrender the property.	□ No
name:	Retain the property and redeem it.	Yes
Description of property securing debt:	Retain the property and enter into a Reaffirmation Agreement.	
occaning dobt.	Retain the property and [explain]:	

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Jeremy Fisher Case number (If known) 17-24756-GLT Debtor 1 l ast Name Part 2: **List Your Unexpired Personal Property Leases** For any unexpired personal property lease that you listed in Schedule G: Executory Contracts and Unexpired Leases (Official Form 106G), fill in the information below. Do not list real estate leases. Unexpired leases are leases that are still in effect; the lease period has not yet ended. You may assume an unexpired personal property lease if the trustee does not assume it. 11 U.S.C. § 365(p)(2). Describe your unexpired personal property leases Will the lease be assumed? Lessor's name: Colosimo Auto Sales ☐ No Y Yes Description of leased Audi property: Lessor's name: ☐ No Yes Description of leased property: Lessor's name: ☐ No ☐ Yes Description of leased property: Lessor's name: ☐ No ☐ Yes Description of leased property: Lessor's name: ☐ No ☐ Yes Description of leased property: Lessor's name: ☐ No ☐ Yes Description of leased property: Lessor's name: ☐ No ☐ Yes Description of leased property: Part 3: Sign Below Under penalty of perjury, I declare that I have indicated my intention about any property of my estate that secures a debt and any personal property that is subject to an unexpired lease. /s/ Jeremy Fisher Signature of Debtor 1 Signature of Debtor 2 Date 12/21/2017 Date

MM / DD / YYYY

MM / DD / YYYY

#### Case 17-24756-GLT Doc 17 Filed 12/21/17 Entered 12/21/17 21:05:14 Desc Main Document Page 51 of 68

	Docu	ument	Page 5	51 of	68		
	Fill in this information to identify your case:				Check one box o	only as directed in this form	n and in
	First Name Middle Name	Last Name		1 [	1. There is no	presumption of abuse.	
(5	Debtor 2 Spouse, if filing) First Name Middle Name  Middle Name  Middle Name  Middle Name	Last Name			abuse appli	tion to determine if a presum es will be made under <i>Chapt</i> Calculation (Official Form 12	ter 7
	case number 17-24756-GLT	_			☐ 3. The Means	Test does not apply now bed itary service but it could app	cause of
					☐ Check if this	is an amended filing	
0	fficial Form 122A–1						
_	hapter 7 Statement of Your	Curre	ent Mo	nthi	v Income		12/15
ad do Ab	as complete and accurate as possible. If two married pace is needed, attach a separate sheet to this form. Incl ditional pages, write your name and case number (if known thave primarily consumer debts or because of qualitative Under § 707(b)(2) (Official Form 122A-1Supp) with the second constant of the second constant o	lude the line lown). If you ifying milita this form.	number to believe that	which the	ne additional infor e exempted from a	mation applies. On the top presumption of abuse be	of any cause you
	Part 1: Calculate Your Current Monthly Income	lk					
1	<ul> <li>What is your marital and filing status? Check one only</li> <li>✓ Not married. Fill out Column A, lines 2-11.</li> <li>✓ Married and your spouse is filing with you. Fill out</li> </ul>		ns A and B. I	lines 2-1	1.		
	☐ Married and your spouse is NOT filing with you. Y						
	☐ Living in the same household and are not leg	gally separa	ted. Fill out b	oth Colu	ımns A and B, lines	2-11.	
	Living separately or are legally separated. Fil under penalty of perjury that you and your spous spouse are living apart for reasons that do not in	se are legally	y separated u	inder nor	nbankruptcy law tha	it applies or that you and you	clare ur
	Fill in the average monthly income that you received bankruptcy case. 11 U.S.C. § 101(10A). For example, if August 31. If the amount of your monthly income varied of Fill in the result. Do not include any income amount more income from that property in one column only. If you have	f you are filin during the 6 re than once.	ng on Septem months, add For example	ber 15, t the incor , if both s	the 6-month period me for all 6 months spouses own the sa	would be March 1 through and divide the total by 6.	
					Column A Debtor 1	Column B Debtor 2 or non-filing spouse	
2	Your gross wages, salary, tips, bonuses, overtime, an (before all payroll deductions).	nd commiss	sions		\$_3,500.00	\$	
3	. Alimony and maintenance payments. Do not include p Column B is filled in.	ayments from	m a spouse it	f	\$	\$	
4	All amounts from any source which are regularly paid of you or your dependents, including child support. In from an unmarried partner, members of your household, and roommates. Include regular contributions from a spo filled in. Do not include payments you listed on line 3.	Include regul your depend	lar contributio dents, parents	ins s,	\$	\$	
5	Net income from operating a business, profession, or farm	Debtor 1	Debtor 2				
	Gross receipts (before all deductions)	\$	\$				1.
na de la companya de	Ordinary and necessary operating expenses	- \$	- \$	1. <b>1</b> 10 10 10 10 10 10 10 10 10 10 10 10 10			
and the second second	Net monthly income from a business, profession, or farm	\$	\$	Copy here	\$	\$	
6	Net income from rental and other real property Gross receipts (before all deductions)	Debtor 1 \$	Debtor 2 \$				
reconspectation	Ordinary and necessary operating expenses	- \$	- \$				

Copy

Net monthly income from rental or other real property

7. Interest, dividends, and royalties

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Debtor 1	Jeremy Fisher First Name Middle Name Last Name		Case number (if known)	17-24756-GLT
Avvious the distinguish or expense.			Column A Debtor 1	Column B Debtor 2 or non-filing spouse
8. Un	employment compensation		\$	\$
	not enter the amount if you contend that the amount r der the Social Security Act. Instead, list it here:			<b>*</b>
	For you	\$		
	For your spouse	\$		
	nsion or retirement income. Do not include any amo nefit under the Social Security Act.	unt received that was a	\$	\$
Do as	not include any benefits received under the Social Se a victim of a war crime, a crime against humanity, or in corism. If necessary, list other sources on a separate p	curity Act or payments received iternational or domestic		
-			\$	\$
9-			\$	\$
Т	otal amounts from separate pages, if any.		+\$	+ \$
	<b>Iculate your total current monthly income.</b> Add line: umn. Then add the total for Column A to the total for C		\$_3,500.00	\$ 0.00 = \$ 3,500.00 Total current monthly income
Part	Determine Whether the Means Test App	lies to You		
12. Ca	culate your current monthly income for the year. F			
128	. Copy your total current monthly income from line 1	1	Coj	py line 11 here → \$ 3,500.00
	Multiply by 12 (the number of months in a year).			x 12
121	The result is your annual income for this part of the	form.		12b. \$ <u>42,000.00</u>
13. Ca	culate the median family income that applies to yo	u. Follow these steps:		
Fill	in the state in which you live.	Pennsylvania		
Fill	in the number of people in your household.	3		
	in the median family income for your state and size of			13. \ \\$ <u>77,306.00</u>
To	find a list of applicable median income amounts, go or tructions for this form. This list may also be available a	lline using the link specified in the thick the bankruptcy clerk's office.	ne separate	
14. Ho	w do the lines compare?			
148	Line 12b is less than or equal to line 13. On the to Go to Part 3.	op of page 1, check box 1, Then	re is no presumption	of abuse.
141	Line 12b is more than line 13. On the top of page Go to Part 3 and fill out Form 122A–2.	e 1, check box 2, The presumpti	on of abuse is deter	mined by Form 122A-2.
Part :	Sign Below			A
	By signing here, I declare under penalty of perjury	that the information on this star	tement and in any a	ttachments is true and correct.
	■ Jeremy Fisher    Control of Part   Control o	×	-10-10-1-	
	Signature of Debtor 1	Sign	ature of Debtor 2	
	Date 12/21/2017 MM / DD / YYYY	Date	MM / DD / YYYY	-
	If you checked line 14a, do NOT fill out or file			
	If you checked line 14b, fill out Form 122A-2	and file it with this form.		

Official Form 122A-1

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Fill in this information to identify your case:	Check the appropriate box as directed in lines 40 or 42:
Debtor 1 Jeremy Fisher	According to the calculations required by
First Name Middle Name Last Name	this Statement:
Debtor 2 (Spouse, if filing) First Name Middle Name Last Name	✓ 1. There is no presumption of abuse.
United States Bankruptcy Court for the: Western District of Pennsylvania	☐ 2. There is a presumption of abuse.
Case number 17-24756-GLT	
(If known)	☐ Check if this is an amended filing
Official Form 122A–2 Chapter 7 Means Test Calculation	04/16
Chapter / Means rest Calculation	04/16
Part 1: Determine Your Adjusted Income	
Copy your total current monthly income.	Copy line 11 from Official Form 122A-1 here →
2. Did you fill out Column B in Part 1 of Form 122A–1?	
No. Fill in \$0 for the total on line 3.	
☐ Yes. Is your spouse filing with you?	
☐ No. Go to line 3.	
☐ Yes. Fill in \$0 for the total on line 3.	
<ol> <li>Adjust your current monthly income by subtracting any part of your s household expenses of you or your dependents. Follow these steps:</li> </ol>	pouse's income not used to pay for the
On line 11, Column B of Form 122A–1, was any amount of the income you regularly used for the household expenses of you or your dependents?	reported for your spouse NOT
☐ No. Fill in 0 for the total on line 3.	
Yes. Fill in the information below:	9 8
State each purpose for which the income was used	Fill in the amount you
For example, the income is used to pay your spouse's tax debt or to support people other than you or your dependents	are subtracting from your spouse's income
	\$
	\$
	+ \$

\$ 3,500.00

0.00

4. Adjust your current monthly income. Subtract the total on line 3 from line 1.

0.00

Copy total here .....

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Debtor	1	Jeremy Fis	her Middle Name	Last Name		Case	number (if known) 17-24	1756-GLT	
Part 2	2:	Calculate Yo	our Deductio	ns from Your Inc	come		,		
this Ded	wer to	he questions in i. This information ne expense amou	lines 6-15. To ion may also b unts set out in li	find the IRS stand e available at the I nes 6-15 regardless	lards, go online us bankruptcy clerk's s of your actual expe	ing the link spo office. ense. In later pa	nse amounts. Use the cified in the separate the separate triangle of the form, you was tracted from your spo	ill use some of your	3
and	do no	ot deduct any op	erating expense	es that you subtract	ed from income in li	nes 5 and 6 of F	Form 122A-1.		
				nth, enter the avera			E		
vvhe	eneve	er this part of the	form refers to y	ou, it means both y	ou and your spouse	of Column B of	Form 122A–1 is filled	in.	
5.	Fill in	n the number of	people who cou ny additional de	ld be claimed as expendents whom yo	ductions from inco cemptions on your fe u support. This num	ederal income ta		1	
Na	itiona	al Standards	You must us	e the IRS National S	Standards to answe	r the questions i	in lines 6-7.		
6.				Using the number of g, and other items.	people you entered	I in line 5 and th	ne IRS National Stand	ards, fill	\$_570.00
7.	fill in	the dollar amou er 65 and people	nt for out-of-po- who are 65 or	cket health care. Th older—because old	e number of people	is split into two gher IRS allowa	and the IRS National scategories—people vince for health care con line 22.	vho are	
	Peo	ple who are und	der 65 years of	age					
	7a.	Out-of-pocket h	ealth care allow	vance per person	\$54.00				
	7b.	Number of peop	ole who are und	ler 65	x1_				
	7c.	Subtotal. Multi	ply line 7a by lir	ne 7b.	\$54.00	Copy here→	\$54.00		1.
	Pe	ople who are 6	5 years of age	or older					ı
	7d.	Out-of-pocket h	ealth care allov	vance per person	\$				
	7e.	Number of peo	ple who are 65	or older	x0_				
	7f.	Subtotal. Multi	ply line 7d by lir	ne 7e.	\$0.00	Copy here→	+ \$0.00	norm.	
	7g.	Total. Add lines	s 7c and 7f				\$54.00_	Copy total here	\$54.00

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btor 1	Jeremy F	Fisher Middle Name	Last Name	Case n	number (if known) 17-24756-GL	Γ
Local Sta	ındards	You must use	the IRS Local Standards to	answer the questions in lines	8-15.	
		on from the IRS		n has divided the IRS Local S	Standard for housing for	
			e and operating expenses or rent expenses			æ
To answe	er the ques	tions in lines 8-	9, use the U.S. Trustee Pr	ogram chart.		
			ink specified in the separate e bankruptcy clerk's office.	instructions for this form.		
8. <b>Housi</b> dollar	ng and util amount liste	ities – Insuranc ed for your count	e and operating expenses y for insurance and operatir	: Using the number of people on general expenses.	you entered in line 5, fill in the	\$477.00
9. <b>Housi</b>	ng and util	ities – Mortgage	e or rent expenses:			
9a. Us for	ing the nun your count	nber of people you y for mortgage o	ou entered in line 5, fill in the	dollar amount listed	<u>\$ 841.00</u>	
9b. Tot	tal average	monthly paymer	it for all mortgages and other	er debts secured by your home	<b>.</b>	
COI	ntractually of		monthly payment, add all ar red creditor in the 60 month			
N	lame of the	creditor		Average monthly payment		
	Yuriy Bek	man		\$2,000.00		
_				\$		
-			<u> </u>	+ \$		
		Total a	verage monthly payment	\$ 2,000.00 Cop	_s 2,000.00 amo	peat this bunt on 33a.
S	ubtract line		e monthly payment) from lin	e 9a (mortgage or	\$ 0.00 cop	
	Iculation o	of your monthly	expenses, fill in any addit	ional amount you claim.		
	-	,				F
11. Local t	transporta	tion expenses:	Check the number of vehicle	es for which you claim an owne	ership or operating expense.	
1	. Go to line . Go to line or more. G	1 6.1166	9			
				and the number of vehicles for our Census region or metropol		\$ 502.00

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ebtor 1	Jeremy Fisher First Name Middle Name	Last Name		Case nun	nber (if known)_	17-24756	G-GLT	
for e	icle ownership or lease expe each vehicle below. You may no ddition, you may not claim the e	ot claim the expense	f you do not make any le	e the net owner	ership or lea	ase expens	e e.	=
Veh	nicle 1 Describe Vehicle 1:	2011 Audi				4		
13a.					\$	471.00		
13b.	Average monthly payment for Do not include costs for lease		Vehicle 1.					
	To calculate the average more amounts that are contractual after you filed for bankruptcy.	ly due to each secure		ths				
	Name of each creditor for	Vehicle 1	Average monthly payment					
	Colosimo Auto Sales		\$250.00					
			+ \$	3				
	Total average	e monthly payment	\$250.00	Copy here	<b>-</b> \$	250.00	Repeat this amount on line 33b.	
13c.	Net Vehicle 1 ownership or lea	ase expense					Copy net Vehicle 1	
	Subtract line 13b from line 13	a. If this amount is les	ss than \$0, enter \$0		\$	221.00	expense here	\$221.0
							-	
Veh	icle 2 Describe Vehicle 2:	·	1)	-				
424	Oumanhia as lassica assta	naina IDC Lagai Stand	and					
13d. 13e.					\$			
100.	Do not include costs for lease	B. Transcal & Market Land Reserve administration (*	Vernole 2.					
	Name of each creditor for	Vehicle 2	Average monthly payment					
			\$					
			1.					
		\ v	<b>-</b> \$	_				
	Total average	ge monthly payment	\$	Copy here	-\$		Repeat this amount on line 33c.	
13f.	Net Vehicle 2 ownership or le	ase expense					Copy net Vehicle 2	
	Subtract line 13e from 13d. If	this amount is less th	an \$0, enter \$0		\$	-	expense here	\$
14. Pub	lic transportation expense: If	you claimed 0 vehicl wance regardless of	es in line 11, using the li whether you use public t	RS Local Stan	ndards, fill ir	the		\$
15 Add	litional public transportation	expense: If you clain	ned 1 or more vehicles in	n line 11 and i	f you claim	that you ma	ay also	
IJ. Auu			hat you believe is the ap	propriate evo	once but w	nu may not	claim	

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D	ebtor		Case number (if known) 17-24756-GLT	
		First Name Middle Name	Last Name	
	Otl		n addition to the expense deductions listed above, you are allowed your monthly expenses for he following IRS categories.	
		employment taxes, Social Sec pay for these taxes. However,	unt that you will actually owe for federal, state and local taxes, such as income taxes, self- urity taxes, and Medicare taxes. You may include the monthly amount withheld from your if you expect to receive a tax refund, you must divide the expected refund by 12 and total monthly amount that is withheld to pay for taxes.	\$_875.00
		Do not include real estate, sale	es, or use taxes.	4
	17.	nvoluntary deductions: The union dues, and uniform costs	total monthly payroll deductions that your job requires, such as retirement contributions,	
		Do not include amounts that a	re not required by your job, such as voluntary 401(k) contributions or payroll savings.	\$
		together, include payments that	thly premiums that you pay for your own term life insurance. If two married people are filing it you make for your spouse's term life insurance. Do not include premiums for life, for a non-filing spouse's life insurance, or for any form of life insurance other than term.	\$
		Court-ordered payments: Thas agency, such as spousal or ch	e total monthly amount that you pay as required by the order of a court or administrative	
			ast due obligations for spousal or child support. You will list these obligations in line 35.	\$ 350.00
			amount that you pay for education that is either required:	
		as a condition for your job, of		
			ly challenged dependent child if no public education is available for similar services.	\$
	21.		mount that you pay for childcare, such as babysitting, daycare, nursery, and preschool.	\$
		Do not include payments for a	ny elementary or secondary school education.	\
		s required for the health and v nealth savings account. Includ	ses, excluding insurance costs: The monthly amount that you pay for health care that yelfare of you or your dependents and that is not reimbursed by insurance or paid by a e only the amount that is more than the total entered in line 7. or health savings accounts should be listed only in line 25.	\$
		you and your dependents, suc	phone services: The total monthly amount that you pay for telecommunication services for has pagers, call waiting, caller identification, special long distance, or business cell phone y for your health and welfare or that of your dependents or for the production of income, if it loyer.	+ \$
		Do not include payments for be expenses, such as those repo	asic home telephone, internet and cell phone service. Do not include self-employment ted on line 5 of Official Form 122A-1, or any amount you previously deducted.	
	24.	Add all of the expenses allow	ved under the IRS expense allowances.	\$ 3,049.00
		Add lines 6 through 23.		\$ 070 10:00
		Commission of the State of the Commission of the		later the second
ř.				

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25. <b>He</b> eins dep He	Note: Do note: alth insurance, disability insurance, and	additional deductions allowed by the ot include any expense allowances			
25. <b>He</b> eins dep He	Note: Do note: Note and alth insurance, disability insurance, and				
der He	alth insurance, disability insurance, and	of include any expense allowances			
der He	alth insurance, disability insurance, and		s listed in lines 0-24.		
Dis	eurance, disability insurance, and health sav pendents.	health savings account expensions accounts that are reasonably	es. The monthly expenses for health necessary for yourself, your spouse, or your		
	ealth insurance	\$260.00			
He	sability insurance	\$			
	ealth savings account	+ \$			
Tot	tal	\$ 260.00	Copy total here→	s	260.00
			Copy total nere 7	Ψ	
	you actually spend this total amount?				
	No. How much do you actually spend? Yes	\$			
323	res				
you	ontinuing contributions to the care of hor ntinue to pay for the reasonable and necess ur household or member of your immediate clude contributions to an account of a qualifi	sary care and support of an elderly family who is unable to pay for su	, chronically ill, or disabled member of ch expenses. These expenses may	\$	
27. <b>Pro</b> of y	otection against family violence. The reas you and your family under the Family Violen	sonably necessary monthly expensice Prevention and Services Act or	es that you incur to maintain the safety other federal laws that apply.	\$	
Ву	law, the court must keep the nature of these	e expenses confidential.			
28 <b>Ad</b> ı	ditional home energy costs. Your home e	nergy costs are included in your in	surance and operating evpenses on line 8		
	ou believe that you have home energy cost				
8, ti	hen fill in the excess amount of home energ	gy costs.		\$	
	u must give your case trustee documentatio imed is reasonable and necessary.	n of your actual expenses, and you	u must snow that the additional amount		
per	ucation expenses for dependent children child) that you pay for your dependent child mentary or secondary school.			\$	
	u must give your case trustee documentation sonable and necessary and not already according to the control of t		u must explain why the amount claimed is	3	
* 5	Subject to adjustment on 4/01/19, and every	3 years after that for cases begun	on or after the date of adjustment.		
high	ditional food and clothing expense. The paper than the combined food and clothing all of the food and clothing allowances in the l	owances in the IRS National Stand		\$	
	find a chart showing the maximum additions form. This chart may also be available at the		nk specified in the separate instructions for		
You	u must show that the additional amount clair	med is reasonable and necessary.			
	ntinuing charitable contributions. The am truments to a religious or charitable organiz		ribute in the form of cash or financial	+ \$	
32 <b>Ad</b>	d all of the additional expense deduction	is.		s	260.00
	d lines 25 through 31.			*-	

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Det	otor 1	Jeremy Fisher First Name Middle Name	Last Name		Cas	e number (if kn	own) 17-2475	6-GLT		
	Deduction	ons for Debt Payment						eterritorio de de describiro de combinación de la composição de la composi		Megamena-Accomite Medical Control Colonic Con-
	33 Ford	ebts that are secured by a	n interest in property that	vou own inc	luding homo	mortanase	vehicle			
		, and other secured debt, i			Juding nome	mortgages	venicie			
		Iculate the total average mor or in the 60 months after you			ontractually du	e to each se	ecured			
		Mortgages on your home	:			Avera payme	ge monthly ent			
	33a.	Copy line 9b here				\$_	2,000.00			
		Loans on your first two ve	ehicles:							
	33b.	Copy line 13b here.				\$_	250.00			
		Copy line 13e here								
		List other secured debts:		······································		Ψ				
	33u.					2				*.
		Name of each creditor for o secured debt	other Identify proper secures the de		Does payme include taxe or insurance	s				
					☐ No☐ Yes	\$				
		-			☐ No☐ Yes	\$				
					☐ No	+ \$	Y			
					☐ Yes			Copy total		
	33e. To	otal average monthly paymer	nt. Add lines 33a through 33	d		\$	2,250.00	here →	\$_ 2	2,250.00
		ny debts that you listed in ler property necessary for				·,				
	□ N	o. Go to line 35.								
	∡ Ye	es. State any amount that yo listed in line 33, to keep p Next, divide by 60 and fill	oossession of your property							
		Name of the creditor	Identify property that secures the debt	Total cur amount	е	Mon	thly cure unt			
		Yuriy Bekman	1385 Glencoe	\$0.	<u>00</u> + 60 =	\$	0.00			
		Colosimo Auto	Audi	\$0.	<u>00</u> ÷ 60 =	\$	0.00			
				\$	÷ 60 =	+\$				
					Total	\$	0.00	Copy total	\$	0.00
		ou owe any priority claims						l		
		re past due as of the filing	date of your bankruptcy	ase? 11 U.S	.C. § 507.					
		<ul> <li>Go to line 36.</li> <li>Fill in the total amount of ongoing priority claims, si</li> </ul>	all of these priority claims. E uch as those you listed in lin		current or					
			due priority claims			\$		÷ 60 =	S	

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Debtor 1	Jeremy Fisher First Name Middle Name Last Name	Case number (if known) 17-24756-GLT
26		
	<b>Are you eligible to file a case under Chapter 13?</b> 11 U For more information, go online using the link for <i>Bankrup</i> instructions for this form. <i>Bankruptcy Basics</i> may also be	otcy Basics specified in the separate
	No. Go to line 37.	
¥	Yes. Fill in the following information.	
	Projected monthly plan payment if you were filing	under Chapter 13 \$600
	Current multiplier for your district as stated on the Administrative Office of the United States Courts North Carolina) or by the Executive Office for Uni other districts).	(for districts in Alabama and
	To find a list of district multipliers that includes you link specified in the separate instructions for this favailable at the bankruptcy clerk's office.	ur district, go online using the form. This list may also be
	Average monthly administrative expense if you we	ere filing under Chapter 13 \$\frac{19.20}{here}\$\$ \$\frac{19.20}{\text{here}}\$\$
	dd all of the deductions for debt payment. dd lines 33e through 36.	\$ <u>2,269.20</u>
Total	Deductions from Income	
38. <b>A</b> c	dd all of the allowed deductions.	
	ppy line 24, All of the expenses allowed under IRS pense allowances	\$3,049.00
Co	ppy line 32, All of the additional expense deductions	\$260.00
Со	ppy line 37, All of the deductions for debt payment	+\$2,269.20
	Total deductions	\$\$\$\$\$\$\$
Part	3: Determine Whether There Is a Presumption	on of Abuse
39. <b>C</b> a	alculate monthly disposable income for 60 months	
39	9a. Copy line 4, adjusted current monthly income	\$ <u>3,500.00</u>
39	9b. Copy line 38, Total deductions	<b>-</b> \$5,578.20
39	9c. Monthly disposable income. 11 U.S.C. § 707(b)(2). Subtract line 39b from line 39a.	\$2,078.20
	For the next 60 months (5 years)	x 60
39	9d. <b>Total</b> . Multiply line 39c by 60	\$ <u>-124,692.0C</u> Copy here→ \$ <u>-124,692.0C</u>
		a.
40. Fi	ind out whether there is a presumption of abuse. Chec	ck the box that applies:
4	The line 39d is less than \$7,700*. On the top of page of to Part 5.	1 of this form, check box 1, There is no presumption of abuse. Go
	The line 39d is more than \$12,850*. On the top of pag may fill out Part 4 if you claim special circumstances. The	ne 1 of this form, check box 2, <i>There is a presumption of abuse</i> . You hen go to Part 5.
	The line 39d is at least \$7,700*, but not more than \$1	12,850*. Go to line 41.
		after that for cases filed on or after the date of adjustment.

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btor 1	Jeremy Fisher	Case number (if known) 17-24756-GLT				
	First Name Middle Name Last Name					
41. 41a	a. Fill in the amount of your total nonpriority unsecured debt. If y Summary of Your Assets and Liabilities and Certain Statistical Info. (Official Form 106Sum), you may refer to line 3b on that form	rmation Schedules	•			
			x .25			
2.11			1 .20	NAMA NAMA		
416	b. 25% of your total nonpriority unsecured debt. 11 U.S.C. § 707( Multiply line 41a by 0.25.		\$	Copy here	\$	
				***************************************		
is e	ermine whether the income you have left over after subtracting a snough to pay 25% of your unsecured, nonpriority debt. eck the box that applies:	all allowed deductions				
	Line 39d is less than line 41b. On the top of page 1 of this form, che Go to Part 5.	eck box 1, There is no presur	nption of abuse.			
	Line 39d is equal to or more than line 41b. On the top of page 1 of of abuse. You may fill out Part 4 if you claim special circumstances.	this form, check box 2, <i>There</i> then go to Part 5.	e is a presumption	1		
rt 4:	Give Details About Special Circumstances					
	Olve Details About Special Circumstances					
o you	have any special circumstances that justify additional expenses		monthly income	for which th	ere is no	
easona	able alternative? 11 U.S.C. § 707(b)(2)(B).	or adjustments of current	montally moonic			
reasona	able alternative? 11 U.S.C. § 707(b)(2)(B).	or adjustments of current	monuny moonie			
reasona	Go to Part 5.					
reasona	able alternative? 11 U.S.C. § 707(b)(2)(B).					
reasona	Go to Part 5.  Fill in the following information. All figures should reflect your average.	ge monthly expense or incom	e adjustment			
reasona	Go to Part 5.  Fill in the following information. All figures should reflect your average for each item. You may include expenses you listed in line 25.  You must give a detailed explanation of the special circumstances the adjustments necessary and reasonable. You must also give your care.	ge monthly expense or incom	e adjustment	y expense		
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# Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)

#### This notice is for you if:

You are an individual filing for bankruptcy, and

Your debts are primarily consumer debts. Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose."

#### The types of bankruptcy that are available to individuals

Individuals who meet the qualifications may file under one of four different chapters of the Bankruptcy Code:

- Chapter 7 Liquidation
- Chapter 11— Reorganization
- Chapter 12— Voluntary repayment plan for family farmers or fishermen
- Chapter 13— Voluntary repayment plan for individuals with regular income

You should have an attorney review your decision to file for bankruptcy and the choice of chapter.

Chap	ter 7:	Liquidation
	\$245	filing fee
	\$75	administrative fee
+	\$15	trustee surcharge
	\$335	total fee

Chapter 7 is for individuals who have financial difficulty preventing them from paying their debts and who are willing to allow their non-exempt property to be used to pay their creditors. The primary purpose of filing under chapter 7 is to have your debts discharged. The bankruptcy discharge relieves you after bankruptcy from having to pay many of your pre-bankruptcy debts. Exceptions exist for particular debts, and liens on property may still be enforced after discharge. For example, a creditor may have the right to foreclose a home mortgage or repossess an automobile.

However, if the court finds that you have committed certain kinds of improper conduct described in the Bankruptcy Code, the court may deny your discharge.

You should know that even if you file chapter 7 and you receive a discharge, some debts are not discharged under the law.

Therefore, you may still be responsible to pay:

- most taxes;
- most student loans;
- domestic support and property settlement obligations;

- most fines, penalties, forfeitures, and criminal restitution obligations; and
- certain debts that are not listed in your bankruptcy papers.

You may also be required to pay debts arising from:

- fraud or theft;
- fraud or defalcation while acting in breach of fiduciary capacity;
- intentional injuries that you inflicted; and
- death or personal injury caused by operating a motor vehicle, vessel, or aircraft while intoxicated from alcohol or drugs.

If your debts are primarily consumer debts, the court can dismiss your chapter 7 case if it finds that you have enough income to repay creditors a certain amount. You must file *Chapter 7 Statement of Your Current Monthly Income* (Official Form 122A–1) if you are an individual filing for bankruptcy under chapter 7. This form will determine your current monthly income and compare whether your income is more than the median income that applies in your state.

If your income is not above the median for your state, you will not have to complete the other chapter 7 form, the *Chapter 7 Means Test Calculation* (Official Form 122A–2).

If your income is above the median for your state, you must file a second form —the *Chapter 7 Means Test Calculation* (Official Form 122A–2). The calculations on the form—sometimes called the *Means Test*—deduct from your income living expenses and payments on certain debts to determine any amount available to pay unsecured creditors. If

your income is more than the median income for your state of residence and family size, depending on the results of the *Means Test*, the U.S. trustee, bankruptcy administrator, or creditors can file a motion to dismiss your case under § 707(b) of the Bankruptcy Code. If a motion is filed, the court will decide if your case should be dismissed. To avoid dismissal, you may choose to proceed under another chapter of the Bankruptcy Code.

If you are an individual filing for chapter 7 bankruptcy, the trustee may sell your property to pay your debts, subject to your right to exempt the property or a portion of the proceeds from the sale of the property. The property, and the proceeds from property that your bankruptcy trustee sells or liquidates that you are entitled to, is called *exempt property*. Exemptions may enable you to keep your home, a car, clothing, and household items or to receive some of the proceeds if the property is sold.

Exemptions are not automatic. To exempt property, you must list it on *Schedule C: The Property You Claim as Exempt* (Official Form 106C). If you do not list the property, the trustee may sell it and pay all of the proceeds to your creditors.

#### Chapter 11: Reorganization

\$1,167 filing fee

+ \$550 administrative fee

\$1,717 total fee

Chapter 11 is often used for reorganizing a business, but is also available to individuals. The provisions of chapter 11 are too complicated to summarize briefly.

#### **Read These Important Warnings**

Because bankruptcy can have serious long-term financial and legal consequences, including loss of your property, you should hire an attorney and carefully consider all of your options before you file. Only an attorney can give you legal advice about what can happen as a result of filing for bankruptcy and what your options are. If you do file for bankruptcy, an attorney can help you fill out the forms properly and protect you, your family, your home, and your possessions.

Although the law allows you to represent yourself in bankruptcy court, you should understand that many people find it difficult to represent themselves successfully. The rules are technical, and a mistake or inaction may harm you. If you file without an attorney, you are still responsible for knowing and following all of the legal requirements.

You should not file for bankruptcy if you are not eligible to file or if you do not intend to file the necessary documents.

Bankruptcy fraud is a serious crime; you could be fined and imprisoned if you commit fraud in your bankruptcy case. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

#### Chapter 12: Repayment plan for family farmers or fishermen

1.	\$200	filing fee
+	\$75	administrative fee
	\$275	total fee

Similar to chapter 13, chapter 12 permits family farmers and fishermen to repay their debts over a period of time using future earnings and to discharge some debts that are not paid.

# Chapter 13: Repayment plan for individuals with regular income

	\$235	filing fee
+	\$75	administrative fee
	\$310	total fee

Chapter 13 is for individuals who have regular income and would like to pay all or part of their debts in installments over a period of time and to discharge some debts that are not paid. You are eligible for chapter 13 only if your debts are not more than certain dollar amounts set forth in 11 U.S.C. § 109.

Under chapter 13, you must file with the court a plan to repay your creditors all or part of the money that you owe them, usually using your future earnings. If the court approves your plan, the court will allow you to repay your debts, as adjusted by the plan, within 3 years or 5 years, depending on your income and other factors.

After you make all the payments under your plan, many of your debts are discharged. The debts that are not discharged and that you may still be responsible to pay include:

- domestic support obligations,
- most student loans,
- certain taxes,
- debts for fraud or theft,
- debts for fraud or defalcation while acting in a fiduciary capacity,
- most criminal fines and restitution obligations,
- certain debts that are not listed in your bankruptcy papers,
- certain debts for acts that caused death or personal injury, and
- certain long-term secured debts.

#### Warning: File Your Forms on Time

Section 521(a)(1) of the Bankruptcy Code requires that you promptly file detailed information about your creditors, assets, liabilities, income, expenses and general financial condition. The court may dismiss your bankruptcy case if you do not file this information within the deadlines set by the Bankruptcy Code, the Bankruptcy Rules, and the local rules of the court.

For more information about the documents and their deadlines, go to:

http://www.uscourts.gov/forms/bankruptcy-forms

#### Bankruptcy crimes have serious consequences

- If you knowingly and fraudulently conceal assets or make a false oath or statement under penalty of perjury—either orally or in writing—in connection with a bankruptcy case, you may be fined, imprisoned, or both.
- All information you supply in connection with a bankruptcy case is subject to examination by the Attorney General acting through the Office of the U.S. Trustee, the Office of the U.S. Attorney, and other offices and employees of the U.S. Department of Justice.

#### Make sure the court has your mailing address

The bankruptcy court sends notices to the mailing address you list on *Voluntary Petition* for *Individuals Filing for Bankruptcy* (Official Form 101). To ensure that you receive information about your case, Bankruptcy Rule 4002 requires that you notify the court of any changes in your address.

A married couple may file a bankruptcy case together—called a *joint case*. If you file a joint case and each spouse lists the same mailing address on the bankruptcy petition, the bankruptcy court generally will mail you and your spouse one copy of each notice, unless you file a statement with the court asking that each spouse receive separate copies.

# Understand which services you could receive from credit counseling agencies

The law generally requires that you receive a credit counseling briefing from an approved credit counseling agency. 11 U.S.C. § 109(h). If you are filing a joint case, both spouses must receive the briefing. With limited exceptions, you must receive it within the 180 days **before** you file your bankruptcy petition. This briefing is usually conducted by telephone or on the Internet.

In addition, after filing a bankruptcy case, you generally must complete a financial management instructional course before you can receive a discharge. If you are filing a joint case, both spouses must complete the course.

You can obtain the list of agencies approved to provide both the briefing and the instructional course from: <a href="http://www.uscourts.gov/services-forms/bankruptcy/credit-counseling-and-debtor-education-courses">http://www.uscourts.gov/services-forms/bankruptcy/credit-counseling-and-debtor-education-courses</a>.

In Alabama and North Carolina, go to: <a href="http://www.uscourts.gov/services-forms/bankruptcy/credit-counseling-and-debtor-education-courses">http://www.uscourts.gov/services-forms/bankruptcy/credit-counseling-and-debtor-education-courses</a>.

If you do not have access to a computer, the clerk of the bankruptcy court may be able to help you obtain the list.

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B2030 (Form 2030) (12/15)

#### United States Bankruptcy Court

			Western	District Of_	Pennsylvani	<u>a_</u>	
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					Case No	17-24756-GLT	_
De	ebtor				Chapter	7	_
		DISCLOS	URE OF COMP	ENSATION OF	ATTORNEY FO	OR DEBTOR	
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	□ D	ebtor	Other (s	specify)			
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5.	In return for case, inclu		sclosed fee, I have	e agreed to render	legal service for a	all aspects of the banks	ruptcy
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	b. Prepar	ration and filing	g of any petition, s	schedules, stateme	nts of affairs and	plan which may be re	quired;
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B2030	(Form	2030)	(12/1)	5)

d.	Representation of the debtor	W XdXxXxXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXX	contested bankruptcy matters:
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e.	Other	provisions	as	needed?	l
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6. By agreement with the debtor(s), the above-disclosed fee does not include the following services: Representation in adversary proceedings, unless a separate fee agreement is made.

#### CERTIFICATION

I certify that the foregoing is a complete statement of any agreement or arrangement for payment to me for representation of the debtor(s) in this bankruptcy proceeding.

12/21/2017

/s/ P. William Bercik

Date

Signature of Attorney

Law Offices of P. William Bercik

Name of law firm

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	COURT FOR THE WESTERN DISTRICT OF PE YLVANIA
IN RE:	
JEREMY FISHER,	Bankruptcy No. 17-24756-GLT
Debtor. ************************************	Chapter 7
JEREMY FISHER,	
Movant,	
Vs.	
NO RESPONDENT.	
VERIFIED STATEMENT	REGARDING PAY ADVICES
I, Jeremy Fisher, Debtor, hereby verify	y that I have no payment advices as I am self-
employed. My income is approximately \$3,5	500.00 per month.
This statement is made pursuant to 18	Pa. C.S.A. 4904, relating to unsworn statements to
authorities.	
Dated: 12/21/2017	/s/ Jeremy Fisher Jeremy Fisher